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The CANADIAN FORCES DENTAL SERVICES Quarterly

VOLUME FOURTEEN · NUMBER ONE · APRIL 1973 ·

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JUN 22 1973

The CFDS Quarterly

·VOLUME 14·NUMBER 1·APRIL 1973·

Published by authority of Brigadier-General Garth C Evans, CD, QHDS, DDS, FICD, in April, July, October and January, The Quarterly serves as a means for the exchange of ideas, experiences and information within the Canadian Forces Dental Services. Views and opinions expressed are those of the authors and not necessarily those of the Director General of Dental Services or the Department of National Defence.

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Second Clasps to CD's - 127 years of service (Page 25)

The CFDS Quarterly may be subscribed for at $6.00 per year by writing to:

The Director General of Dental Services,
National Defence Headquarters,
Ottawa, Ontario, Canada.
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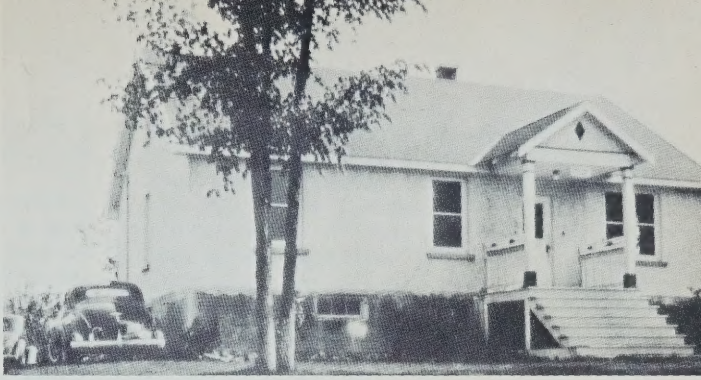
Flashback

The photo of the Ottawa dental clinic featured on the back cover of the January '73 issue seems to have promoted feelings of nostalgia from two of our retired members of the Dental Services, as the following letter and article attest.



Director General of Dental Services,
National Defence Headquarters,
Ottawa, Ontario.

February 27, 1973

... The photograph of the RCAF Station Rockcliffe dental clinic on the back page was of particular interest since I happened to be the dental officer who opened that particular clinic a few months earlier. The original clinic was located in one room of the Station hospital and, of course, became inadequate in a very short time after the outbreak of war. Incidentally, the 1939 Dodge Custom Opera Coupe parked beside the building belonged to me and was purchased from the Station MO who unfortunately was posted overseas with the first RCAF Squadron to leave for the UK ...

K.M. Baird, BGen (ret'd)

The Birth of No. 1 Dental Unit

Colonel C.M. Cornish, CD, DDS
(Ret'd)

No. 1 Dental Unit originally came into being as a detachment formed from clinics of No. 13 Dental Company because of treatment pressures in the Ottawa area. It was formed in April 1964 and its first Commanding Officer was Lieutenant-Colonel J.C. Brick.

Let us go back to the original clinics in Ottawa under the administration of No 13 Dental Company with headquarters in Trenton. There were two-chair clinics at RCAF Stations Rockcliffe and Uplands and a four-chair clinic at National Defence in Cartier Square, the latter known to one and all as No. 1 Dental Clinic, and as the saying went,"Post me anywhere but No. 1 Clinic in Ottawa".

In a headquarters such as NDHQ, dental treatment demands were much more complex than in a regimental or RCAF station clinic. The Admirals, Generals and Air Marshalls wanted to be treated yesterday and this was not an unusual demand because their lives were regulated by calendars, not clocks, and in a few days they could be in Paris, London or Yemen. The RCDC School, located at 541 Sussex Drive, being staffed with specially trained officers, and using the most up to date equipment and supplies, looked after a large amount of this requirement and took a considerable load off No. 1 Clinic.

This happy state of affairs unfortu-

nately came to an end with the move of the School to Camp Borden in 1957. To help No. 1 Clinic cope with their suddenly increased treatment load, it was moved to the space vacated by the School and with the larger accommodation a concomitant expansion took place with more equipment, more personnel,personnel with specialty training and a stores NCO to handle the supplies. Of interest, this clinic received the first airotor placed in a clinic in the Corps.

When the National Defence Medical Centre (NDMC) was built in Ottawa, an RCDC officer was posted there as Chief of the Dental Department. About this time arrangements were made for all dental emergencies in the Ottawa area during the silent hours to report to NDMC. A duty dental officer from the area was always available, but downtown Ottawa was "empty" during after-duty hours. At NDMC all services were available for emergency care.

In 1964 the Director General of Dental Services decided that the entire Ottawa area complex should be taken out of No. 13 Dental Company and No. 1 Dental Detachment was formed which included clinics at NDHQ, RCAF Rockcliffe, RCAF Uplands, HMCS Gloucester and NDMC. This meant more administrative personnel and included a dental equipment repair technician. For many years the Senior Dental Officer in No.1 Clinic held the rank of Lieutenant-Colonel and on the formation of No. 1 Dental Detachment he became its Commanding Officer while continuing to be an operating dentist.

In January 1965 the NDHQ Clinic moved from Sussex Drive to a new building at 100 Gloucester Street in Ottawa where it remains. This was an excellent move because the RCDC was provided with an entire floor and allowed to design a ten-chair clinic. The Sussex Drive location left much to be desired, as many personnel will remember.

When I came to Ottawa in 1957, there were ten thousand servicemen in the area and prior to the preventive dentistry programme the sick parades at the NDHQ clinic were tremendous. The personnel who worked there during my service were exceptional. It was totally different from any other military dental duty because it was strictly dental treatment oriented --- no sports nor any organized activities as one found in camps and stations.

Eventually the whole Ottawa area became a group practice involving an oral surgeon, a periodontist, a prosthodontist, hygienists and therapists, which provided excellent total dental treatment on a clinic basis.

The Unit has, of necessity, changed over the years since its inception. Even though now a part of Air Transport Command, everything still seems to rotate around the NDHQ Clinic. Rockcliffe and Uplands have been amalgamated into Canadian Forces Base Ottawa North (N) and South (S) respectively, with two dental officers in each location. The Base Dental Officer for CFB Ottawa is located at CFB Ottawa (N) while the Deputy B Dent O is located in the Ottawa (S) Clinic.

The Unit headquarters has moved to the treatment facility at NDMC. Two part-time clinics, one underground,and one at Canadian Defence Liaison Establishment in London, England, complete the treatment responsibility for the Unit today.

The "downtown" or NDHQ clinic, responsible for the personnel in Headquarters, has undergone radical renovations in the past few years. A new and modern central laboratory was installed on the sixth floor of this commercial building. The clinic itself was renovated, operatories tandemized, and a new OC's office and operatory installed in the vacated laboratory area.

Preventive dentistry disease control centres (or brush-in rooms) are built into the three larger clinics. A different layout has been tried in each facility with encouraging results. The trend is evidently continuing since we are hearing more and more about the health educators and our dental personnel are all involved to a degree in health education.

It is important to remember that the birth of No. 1 Dental Unit came about from a tremendous local treatment demand. The personnel at NDHQ were dentally minded and felt that now they were posted to headquarters, the gold bridge they were refused at sea or in the field could now be provided by Her Majesty -- P.D.Q. The challenge was met by all dental personnel working together. In

dealing with very senior officers in the three services, many humorous incidents occurred and often DGDS came to the rescue. During my service in NDHQ clinic it became very clear that dental treatment to a large number had to be done by group practice or a team effort. No. 1 Dental Unit became a concentrated treatment group in a small area as compared to other dental units which covered thousands of miles. The same thing existed during the war with a complete dental company for just Camp Borden. In the case of No. 1 Dental Unit much planning and training was done to provide the experts needed for a complete group practice. Examples from this type of treatment in the military can be used when large numbers are treated in future denticare schemes.

No.1 Dental Detachment
Senior Dental Officers

LCol J.A. MacGowan	1949
Maj C.E. Purdy	1949-51
Maj W.O. Gardiner	1951
LCol I.A.L. Miller	1952
LCol V.R. Farrell	1952-55
LCol B.P. Kearney	1955-57
LCol R.H.G. Cunningham	1958
LCol C.M. Cornish	1959
LCol R.B. Jackson	1959-61
LCol C.M. Cornish	1961-63
LCol J.C. Brick	1963-64

No. 1 Dental Unit
Commanding Officers

LCol J.C. Brick	1964
LCol C.M. Cornish	1965
LCol W.H. Carter	1966
LCol W.H. Harrington	1966-69
Major D.E. McDermott	1969-71
LCol J.V.P. Chatwin	1971-

Complete Denture Rehabilitation

Lieutenant-Colonel L.A. Richardson, CD, DDS.

The CFDS is required to treat many patients in the initial years of their denture wearing experience when the resorptive process has not yet destroyed the foundation tissues upon which the dentures rest. If functional well fitting dentures are fabricated and if tissue health is maintained through continuous proper fit and function, these patients will embark on their denture wearing years with a much more favorable long term prognosis.

Gordon[1] lists five groups of patients who would be better served by relining their old dentures. Members of his last group, patients who have changed residence, are routinely encountered in providing a military dental service and members of the group of psychologically handicapped patients are less frequently encountered. Aged, chronically ill and economically handicapped patients seldom require treatment in the military environment.

The American Academy of Denture Prosthesis has stated, "The proper relining of complete dentures is one of the most exacting procedures encountered in rendering denture service."[2]

DEFINITION

The Glossary of Prosthodontic Terms defines *reline* as a process "to resurface the tissue side of a denture with new base material to make it fit more accurately" whereas a *rebase* is defined as "a process of refitting a denture by the replacement of the denture base material without changing the occlusal relations of the teeth".[3]

Both procedures accomplish the same purpose.

Both procedures require an impression.

Both procedures are incomplete patient services as no mention is made of the need to rehabilitate the foundation tissues prior to the procedure or to restore the occlusion after completion.

PATIENT AND DENTURE EVALUATION

The following factors must be favorable before a rebase or reline may be undertaken with any expectation of success.

Tissue Health. A relined denture is not satisfactory unless it is supported by healthy tissue. To effectively restore optimum tissue health the causes of tissue abuse must be diagnosed and eliminated.

Vertical Dimension. The vertical dimension of occlusion must be correct or correctable to permit a successful denture reline or rebase. Excessive vertical dimension of occlusion is not tolerated by the supporting tissue and is difficult to correct in conjunction with a rebase. A denture with insufficient vertical dimension does not restore function and esthetics as it does not adequately replace lost teeth and supporting tissues.

Occlusion. The number and position of the teeth on the denture must be such that the occlusion is acceptable or correctable. The anterior teeth must be positioned for facial support, esthetics and phonetics, and the posterior teeth must be correctly positioned for function, tongue room,occlusal height,placement of teeth relative to the residual ridge.

Tissue Coverage. The denture must provide correct tissue coverage to permit making an impression of the denture foundation area of the mouth.

Systemic Factors. In dealing with the older patient, there is a greater possibility of adverse systemic conditions which may affect the patient's oral health. These conditions must be controlled if optimum oral health is to be achieved prior to relining the dentures.

Patient Factors. The cooperation, attitude and denture tolerance of the patient must conform to the limitations of a prosthodontic service. Shortcomings in patient education may be the basis of problems in this area.

OBJECTIVES OF DENTURE REBASE

After the evaluation of the denture wearing patient and his dentures, the goals or objectives of the procedure should be defined. Without this standard it is not possible to determine which patient can be adequately served by this procedure nor is it possible to formulate a valid treatment plan. The following objectives are suggested for a treated patient.

- Healthy oral tissues.
- Occlusal vertical dimension that allows an interocclusal distance that is within normal limits and is acceptable for that particular patient.
- Balanced occlusion in centric and eccentric jaw relations.
- Correct tooth position to provide function and esthetics.
- Complete coverage of denture bearing tissues by the denture base.
- Denture retention.
- Denture stability.
- Correct denture base contours to provide replacement of lost supporting tissues.
- A patient who is well oriented to the requirements and limitations of wearing dentures.
- A well nourished patient in optimum health.

A rebase is an acceptable treatment plan if the result will achieve these objectives.

CLINICAL PROCEDURES

The technique described here outline

a procedure for rebasing upper and lower dentures concurrently. This can become very complicated if there is considerable tissue change. A simpler procedure requiring an additional appointment is to make the impression for the maxillary denture rebase on the first appointment, flask and complete the rebase and then make the mandibular impression and maxillo-mandibular records for the articulator mounting at the second appointment.

Patient Preparations. The patient must first be in a state of optimum health, educated and motivated to accept the advantages and limitations of a prosthodontic service.

Mouth Preparations. The oral tissues must be as healthy as is feasible for that particular patient.To achieve this, removal of old dentures or tissue conditioning[4]is usually necessary and in many cases, surgery may also be necessary for correction of inflammatory papillary hyperplasia, vestibular inadequacies, pathological conditions, adverse bony contours or lack of interridge space. The dentures should be removed from the mouth for at least 48 hours prior to the appointment for the impression.

*Modifications of the Dentures.*The dentures first must be modified to eliminate acrylic undercuts and permit removal from the casts. The border extensions must be modified to provide the correct tissue coverage. Areas of tissue displacement by the denture base must be relieved and the borders shortened by 1 to 2 mm. to avoid distortion of tissue contours in the impression making process.

The Maxillary Impression. The normal impression technique for a satisfactory reline entails border molding procedures, usually with a low fusing compound (followed by an impression with an easily displaced material, such as zinc-oxide paste), to record tissue detail without tissue displacement. Care must be taken to ensure correct positioning of the maxillary denture in the mouth. This is the most difficult part of the procedure. The resorptive process usually permits the maxillary denture to shift superiorly and posteriorly. Corrections must therefore be made in two planes to bring the anterior teeth down and forward to restore lip support and esthetics while at the same time the posterior portion of the denture must be positioned to restore the correct tooth to ridge relationship as well as the correct occlusal plane. This is accomplished in the border molding procedure which also provides a means of extending the tissue coverage by the denture base where necessary. An impression is then made of the supporting tissues with the denture in this position.

Precautions must be taken to ensure that undue pressure is not placed on ridge crest areas and also to ensure that any areas of soft hyperplastic tissues are not displaced by the denture base or the impression materials. It is usually necessary to drill holes in the denture base to permit escape of excess impression material and prevent build-up of pressure on the tissue when the impression is seated. A posterior palatal seal can best be added using the fluid wax technique described by Millsap.[5]

Mandibular Reline Impression. The mandibular impression is made in the same manner as a final mandibular impression using a custom tray. The usual tissue coverage, border seal and tissue detail without tissue displacement is also required for this impression. Under normal circumstances this can best be accomplished using a low fusing compound for border molding followed by an easily displaced impression material. Venting of the denture by drilling holes in the base material over ridge crest areas of soft mobile tissue may be necessary.

Face Bow Record. To correct the occlusal errors that are unavoidable in a reline or rebase, it is necessary to make records and mount the dentures on a semi-adjustable articulator before the laboratory procedures are undertaken. A face bow record is made with the maxillary denture and completed reline impression in the mouth. This record will be used to mount the denture and maxillary cast on the articulator.

Determination of Vertical Dimension of Occlusion. An assessment of vertical dimension is necessary at this stage as a reline impression may alter the vertical dimension of occlusion. The completed procedure should restore the vertical dimension of occlusion, so conse-

quently the vertical dimension with the reline impression in the mouth should be assessed. Only minor changes should be made on the articulator.

Centric Relation Record. A centric relation record is next made, also with the reline impressions in the mouth.This can best be accomplished by using compound on the occlusal surfaces of the mandibular posterior teeth. Other materials such as plaster, zinc oxide paste or wax may be used, but after a record has been made, the compound can be more easily trimmed and is less fragile, permitting easier rechecks of the record.

The compound is traced on the occlusal surface of the dried mandibular teeth to a depth of 3 mm. and softened in a water bath at 140°F. to ensure that the consistency is uniform so that a record can be made with minimal closing pressure and without shifting of the dentures or displacement of the supporting tissues. The centric relation record is made in the softened compound without tooth to tooth contact as any contact of opposing teeth is a potential source of tissue displacement or of a shift of the denture if the contact is made on an inclined plane of a cusp.After the record has been chilled, the compound is trimmed until only the index of the maxillary cusp tips remain on the surface of the compound. The mandibular denture and impression is then returned to the mouth and the centric record verified.

The patient may then be dismissed and the laboratory procedures undertaken.

LABORATORY PROCEDURES

Pouring the Cast. When the clinical procedures are completed, casts of the reline impressions are poured. The impressions should be carefully boxed to ensure duplication of the peripheral borders. In pouring the mandibular cast care must be taken to protect the centric record on the occlusal surfaces of the mandibular teeth. The dentures are not separated from the casts at this time.

Mounting the Casts on the Articulator. The bases of the casts should be indexed to facilitate a subsequent laboratory remount.

The maxillary denture and cast is mounted on the articulator using the face bow record. The incisal edges of the maxillary central incisors should be at the height of the indicator mark on the pin of the articulator.

Prior to mounting the mandibular denture and cast, the pin setting should be adjusted to increase the vertical dimension of the articulator to an amount equivalent to the thickness of the compound centric index on the occlusal surfaces of the mandibular teeth. The mandibular denture and cast is then mounted on the articulator using the centric record.

The articulator pin is next adjusted to the correct vertical dimension of occlusion of the patient. This setting was determined by the clinical findings with regard to vertical dimension after the reline impressions were completed. Any adjustments of vertical dimension of occlusion made at this time must be minimal.

Preliminary Occlusal Corrections. An analysis of the occlusion of the dentures is now made noting discrepancies which may exist as a result of the repositioning of the dentures in making the impressions. No attempts were made to correlate one denture to the other in making the impressions.

To correct the occlusal discrepancies, the mandibular denture is removed from its cast and the denture base cleaned of impression material and extensively relieved to permit it to be repositioned on the cast at correct vertical dimension of occlusion and in centric occlusion with the maxillary denture. During this procedure,the articulator maintains the casts in centric relation at the correct vertical dimension and the mandibular denture is merely being re-oriented to the cast to make centric occlusion coincide with centric relation. The mandibular denture is sealed to the cast in this new position and a preliminary check of eccentric tooth relations is made to determine if the errors are within correctable limits. No attempt is made at this time to balance the occlusion in eccentric position as this is done after the patient remount.

When centric occlusion has been established in centric relation at the correct vertical dimension, the cast is re-

ıoved from the articulator and the dentıre is flasked and processed in the norıal manner.

The cast is remounted on the articula:or after the rebased or relined dentıres are removed from the flasks with heir respective casts.

Laboratory Remount and Occlusal Cor'ections. Errors in occlusion must be orrected before the patient is permit.ed to wear the dentures. A period of settling" of the dentures is not recomıended as this is frequently a period ın which the dentures displace and dis:ort supporting tissues sufficiently to ermit the tissue to accommodate occlus.l discrepancies. The necessary correct.ons can best be accomplished on the ar.iculator and in order to achieve a com.lete rehabilitation of the patient's entures, a trial insertion and patient emount is necessary to correct the er.ors that result from such a complicated atient service. For this reason it is uggested that the laboratory remount be sed only to restore vertical dimension nd centric occlusion.

A remount index for the upper denture ade at this time will eliminate the eed for a new face bow record when the rial insertion and patient remount is ompleted.

The dentures are now removed and polihed ready for trial insertion.

Patient Remount. After the fit and ase extension of the dentures have been hecked, new protrusive and centric reation records are made. The protrusive ecord can best be made by softening a afer of compound in a waterbath and dapting it to the lubricated occlusal urfaces of the mandibular posterior eeth. The record is made at approximaely 8 mm.of protrusion in the same maner as the centric record. After chillng,the record can be removed and a cenric record made.The dentures are mountd in the articulator and if all previous steps have been correctly completed the new centric relation record should coincide with centric occlusion of the dentures. The teeth are then ground to achieve eccentric balance. The incisal guide angle is to a large extent predetermined by the position of the teeth on the dentures and hence the dental officer is not able to control this factor in the same manner as in fabrication of new dentures.

DELIVERY OF THE DENTURES

On delivery of the rebased dentures, the patient must be reminded that, since these dentures have been rehabilitated with new records of tissue contour and mandibular function, adjustment will be required in the same manner as for new dentures. Instructions that the patient should have received previously with regard to wearing, care and cleaning, eating habits and future treatment requirements, should be repeated as necessary.

SUMMARY

A denture reline or rebase can provide complete rehabilitation of a denture patient's function, comfort and esthetics. Clinic and laboratory procedures have been described that will, in conjunction with refitting the dentures,reorient the dentures to the tissues and restore the patient's maxillo-mandibular relations and occlusion.

References

1.Gordon, D.F. *Are new dentures necessary?* J.Pros.Den. 23:5, 1970.
2.*Principles, concepts and practices in prosthodontics*. J.Pros.Den. 12:283,1963.
3.*Glossary of prosthodontic terms*.J.Pros Den. 20:447, 1968.
4.Richardson,L.A. *Restoring tissue health under dentures*. RCDC Quarterly, 6:3, 1965.
5.Millsap, C.H. *Technique for recording the posterior palatal seal area*. Dental Clinics of N.A., November 1964, p.667.

LOOK AT YOUR PROPOSAL FROM A PATIENT'S POINT OF VIEW!

Avoid the hard sell. "A man convinced against his will is unconvinced still".

Dr KE Leslie, LCol DH Protheroe, Dr D McDougal, Cmdre RV Henning, LCol AG Taylor.

Victoria and District Dental Society Day

Major J. L. McNeill, DDS

On Thursday, 18 January, members of No 11 Dental Unit presented a professional program to the Greater Victoria Dental Society. The purpose of this presentation was to express appreciation for the many hospitalities extended by this society to No 11 Dental Unit and to develop a closer liaison with our civilian counterparts.

The afternoon portion of the program commenced with a lecture and slide presentation by LCol Taylor on non-parallel fixed splints.

This was followed by a welcoming address from the Base Commander, Commodore RV Henning who, in the course of his remarks, informed the audience that Canadian Forces personnel and DND civilian employees, along with their dependants, constituted approximately 35,000 members of the Greater Victoria community.

After a short coffee break,LCol Protheroe gave a brief resume of the aims of the CFDS Preventive Dentistry Program and how this program was being implemented at CFB Esquimalt.

Guests were taken on a guided tour of the base Preventive Dentistry clinic where LCol Harrington and members of his staff presented a demonstration of Preventive Dentistry in action.

The program then shifted to the Workpoint Officers' Mess where four very interesting and informative table clinics were presented.

Maj Jim McCallum, now in the second year of a three-year oral surgery course at Madigan Hospital, Tacoma, Washington, presented a radiographic technique using occlusal films. He was aided by Capt Rob Hind of the US Army Dental Corps.

Capt Eric Rosengart and Capt Paul Arnold of Chilliwack presented a very analytical study of some of the problems in the removable partial denture field.

Capt Brian Schow and Capt Cam Croll of the Comox clinic chose"Rapid Movement of Teeth" as their topic, using removable orthodontic appliances.

Capt Barry Kendell and Capt Don Graham represented CFB Esquimalt and presented a simple effective technique for the fabrication of mouthguards.

Following the cocktail hour,guests and hosts enjoyed a mess-dinner-style meal which included such taste-pleasing courses as rainbow trout and glazed orange duckling.

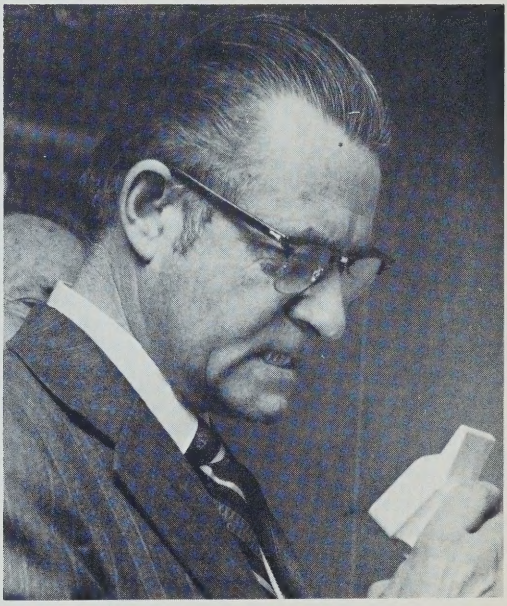
As this was the first mess dinner experience for many of the guests, I gave a brief outline of the customs involved in this fine old military tradition. However,considering that the cocktail party had been somewhat longer than intended,I decided that some of the more restrictive rules would not be applied that evening - much to the relief of the

eighteen hosts and their sixty-seven guests.

To make this Victoria and District Dental Society Day a success, all ranks of No 11 Dental Unit contributed a great deal of both time and effort. Plans were complicated by the fact that the building designated for CFB Esquimalt's new Preventive Dentistry Centre was not available until a week before the presentation.

In retrospect, the program was a complete success, and many of the members of the Victoria society expressed the hope that this would become an annual affair.

Capts B Kendell and D Graham await the first group at their table clinic.



Dr Ben Metcalf tries out the plaque control light.

Cpl Phil Coss, Miss Bonnie Greening, and Cpl Bill Kilgrain - ready to conduct the brush-in.

Masset and The Queen Charlotte Islands

Captain J.C. Steel, BSc. DDS.

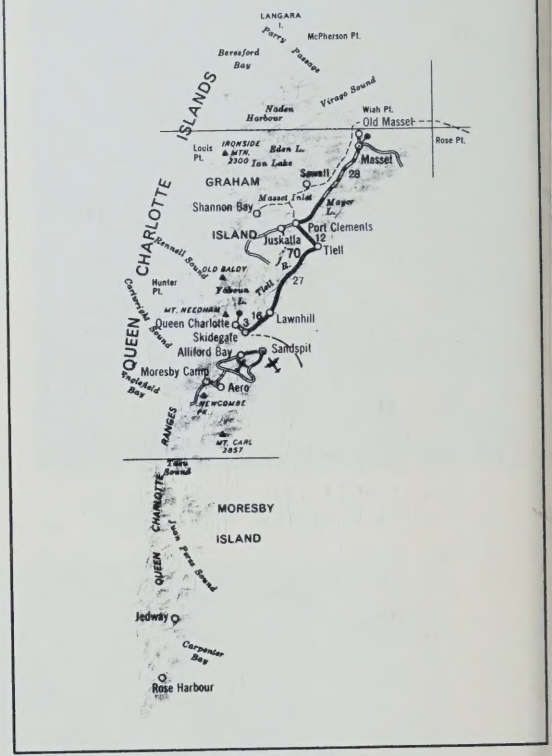
After residing for more than a year in the Queen Charlotte Islands, one is compelled to scratch down a few frantic lines in the remote hope that they may fall upon sympathetic ears somewhere in the civilized world. With such a thought in mind, I would like to relate some of the highlights of the previous year in Masset and the Queen Charlotte Islands.

The Charlottes constitute a thousand-island archipelago which lies in cold northern Pacific waters ninety miles east of Prince Rupert, British Columbia. Graham Island, the largest and most northerly of the group, supports the bulk of the five thousand inhabitants, most of whom are engaged in logging or fishing. Canadian Forces Station Masset, a communications station of approximately 800 members of the Canadian Forces and their dependants, is incorporated in the village of Masset, a coastal settlement on the northern tip of Graham Island.

The earliest inhabitants of the Charlottes were the Haida Indians, a once proud and powerful nation whose influence extended from Alaska to California. Today the Haidas live on reserves at Old Masset, and Skidegate Mission, seventy miles to the south near Queen Charlotte City.

I must admit that the morning my family and I arrived a year ago last September, it was a beautiful sunny day. However, we soon learned the truth -- it does rain occasionally in the Charlottes. Not to be discouraged by the odd monsoon, the fishing tackle was immediately assembled and an outing was organized to the Tlell River, a beautiful spot forty miles south of Masset, to whip the waters for some Coho salmon. A morning's fishing produced two beauties-12 and 14 pounds. They were cleaned, cut into steaks and provided enjoyable eating for several weeks.

Like most newcomers to the Islands, my wife and I became avid agate hunters,and soon invested in a rock tumbler and polishing grits. Long hours were spent beach-combing the area in the agate hunter's pose - all stooped over with a sore back and a crick in the neck. Once



polished,agates are very beautiful keepsakes and good conversation pieces.Finding a Japanese glass float washed up on the sand was always a welcome bonus. It has been estimated that these fishing floats require seven years to cross the Pacific to the shores of the Islands. Seals and sea lions can be seen as frequent visitors to the beaches. If one is lucky he may spot the dorsal fin of a large black and white killer whale slipping through the offshore waters.

Delkatla Slough, a large waterfowl sanctuary not 200 yards from the dental clinic, is a haven for the hundreds of Canada Geese whose flyway passes through the Charlottes. Twice daily the flocks pass back and forth over the station during their feeding routine. If the thought of a goose dinner is too much to bear, then Naden Harbour is the answer. This large bay on the northwest shore of Graham Island is accessible only by float plane or boat. It is one of the best waterfowl hunting areas on the west coast.

The winter months bring Steelhead fever to the Charlottes. These black and silver beauties are most frequently found in the Yakoun River and its tributaries, which lie thirty miles south of Masset. Steelheads are fussy fish and notoriously hard to catch. One must use roe on specially weighted lures that bounce along the gravel bottom of the river. Unless the roe passes close alongside the fish,he will not bite. Beginners always seem to have the luck! One newcomer to the station caught a 33-pounder on his first trip to the river!

Sitka deer are endemic to the Charlottes, and are very plentiful. Deer season is open all year around and there is no bag limit. The venison is terrific - especially barbecued.

My family and I have enjoyed our stay in the Charlottes. Despite the rain and associated problems of isolation, we have found it a rewarding experience which will remain with us always.

(Totems courtesy of Comox Totem Times)

Who said "The good old days"??

Annual Pay and Allowances for Married Permanent Force Officers not in Government Quarters

	Pay	*Allowances*
Captain, on appointment	$1,898	$1,168
Captain, 3 years in rank	2,044	1,168
Captain, 6 years in rank	2,190	1,168
Major, on appointment	2,372	1,387
Major, 3 years in rank	2,518	1,387
Major, 6 years in rank	2,664	1,387

(Canadian Pay and Allowance Regulations, 1924)

11th ANNUAL CFDS BONSPIEL

Once more the annual bonspiel proved that the esprit de corps of the Dental Services is still strong. Rinks from the length and breadth of Canada descended on Base Borden, determined to prove they were going to sweep all opposition aside.

As usual, we had our share of mishaps. A certain group of individuals missed the Trenton-Borden bus - they claimed the bartender didn't know his bus schedule. Other personnel arrived so early we thought of running a course for them to make their TD legal. The winning rink were so busy on Sunday morning replaying their "superb" games in the quarters, they were still there when the Borden-Trenton bus was ready to leave.

This year produced a bumper crop of "old boys" (they could be recognized by their haircuts) and many a pint was sunk in sweet nostalgia.

The Bonspiel Committee, on behalf of the Commandant CFDSS, would like to thank all participants for making this year's 'spiel a rousing success.

BONSPIEL COMMITTEE. *MCpl Schultz, MWO Mazerall, Sgt Lipton, MWO Parker, MWO MacDonald, Capt Kokotailo.*

Capt Kendell receives the doorknob of the Dean's office. (See CFDS Quarterly Vol 13 No 2 of Jul 72, page 28.) *He says he is coming back next year for a key to the faculty washroom.*

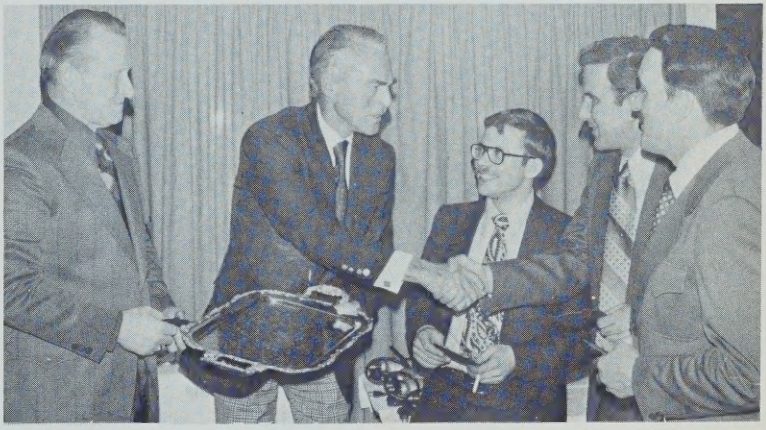
and AWARDS

WANSBROUGH TROPHY

Presented by BGen Evans to Capt Fennell, Capt Kendell, Capt Graham and Capt Watson.

RCDC (R) OFFICERS TROPHY

Presented by BGen Baird to MWO Mazerall, Capt Kokotailo, MCpl Schultz and MWO MacDonald.



SENIOR NCO TROPHY

Presented by CWO Morris to Cpl Peck, WO Clarke, MWO Jones, and Cpl Lambert.

Godfather"
to the ice

Four former Dental Associate Officers attended the PSPT Administration Course 7301 at the CFSAL, Borden, 9 January to 16 February. The four new PSPT/Admin officers are still working with the CFDS - much to their happiness. Capt Bill Jackson is located at Esquimalt, Lt Jack Shore at Trenton, Lt Pete Peterson at Winnipeg and Lt Dan Fraser at Halifax.

Photo shows Lt Dan Fraser being presented with the honour candidate award for placing first on the course by LCol JC Law, Commandant of CFSAL.

12 - DENTAL UNIT

by Lieutenant D.E. Fraser

Visits

Dr Fred W Musaph of the University of B.C., an expert in the field of pantomographic radiology, visited 12 Dental Unit area 15-20 February. Dr Musaph provided the clinic staff at CFB Cornwallis with an updated review of the panorex equipment including discussions and demonstrations on its proper use. He also lectured to clinic staff in the Halifax area.

Maj HS Wood of DGDS staff visited 11-15 March to lay the ground work for standardized examination techniques for the 1973 survey on dental conditions in the Canadian Forces.

LCol DH Protheroe and Lt DE Fraser were in Terrance Bay N.S. on 22 February

on invitation by BGen (Ret'd) BP Kearney, to view the Mobile Dental Facility set up at the local school. The fishing village of Terrance Bay was selected to receive dental care for children under a program headed by Dr Kearney, head of Community Dentistry at Dalhousie University.

Some People In The News

12 Dental Unit's new commanding officer, LCol DH Protheroe has been busy getting settled in, meeting members of 12 Dental Unit and visiting clinics. Recent trips to Gagetown, Chatham (by helicopter), Greenwood and Cornwallis were made as well as a vacation trip to Europe.

On the vacation side, getting away from it all were: LCol and Mrs T Cobb, Sgt and Mrs Wylie to Europe; Capt and Mrs Gunther to Puerto Rico; Capt and Mrs Clark to Barbadoes; Capt and Mrs Murray, LCol and Mrs Hillier, Maj and Mrs Jolly to Bermuda; and Maj and Mrs Andrews to Florida.

Capt Dave Moore and his assistant, Sgt Ken McDonald, departed Halifax aboard HMCS Protecteur 8 January to provide dental treatment to ship's personnel during a tour with the NATO Standing Naval Force Atlantic. They will return 28 May. Sgt McDonald recently pitched the ship's softball team to the Standing Naval Force Trophy.

Maj NH Andrews became something of a TV star during Dental Health Week in February. The slogan of this year's program was "Plaque-free in '73". Maj Andrews zeroed in on plaque diseases during his twenty minute presentation. He appeared on behalf of the Nova Scotia Dental Association and his excellent talk was the subject of much conversation around Halifax for several weeks.

Sports

The third annual unit bonspiel was held at CFB Cornwallis 25-26 January. Good weather, good fellowship and good curling were much in evidence.

Sgt Phil Whynott is beginning to make "A" Event his own personal property. This year, as skip of the CFB Halifax rink, he won a "squeaker" over HMC Dockyard, ably assisted by his mates MWO Kirby, Harry George and Maj Buchholz.

"B" Event was captured by the Summerside "Spud Islanders" conducted by Happy Harry Meisner and his Sidemen, Dave Rowat, Maj Appleford (a CFMS import) and MCpl Arbour. Their opponents, the rink of WO John Christiansen from Gagetown, gave them a tough fight for the honour.

One of the rinks from Cornwallis managed to get at the prize table. Maj Daryl Brown, Capt Bud Bradley, MCpl Jack Dale and Capt Paul Levy took "C" Event over the Gagetown foursome of Jim Atherton, Buck Buchanan, Al McLeod and Woody Skanes.

The entire affair will long be remembered as the year the Gagetown crew initiated the "chopper" service between their base and Cornwallis and the year of the Potato Sack and Top Hat motif set by the boys from The Island.

The 'spiel was organized by Maj Daryl Brown and a group of able assistants. They have earned the thanks of all who were smart enough to attend and probably their fine record and experience will be born in mind when the assignment is up for grabs next year.

The evening of 31 March proved to be a most enjoyable Saturday night for the Halifax-Dartmouth members of the unit as they gathered at the Windsor Park Curling Club for a mixed curling bonspiel. Once again, Sgt Harold Roberts and the local entertainment committee helped set the scene for this fun-filled event. Appropriate prizes were presented to the lucky foursomes.

Tuesday night has become bowling night for unit members and wives in the Halifax area. Those partaking in the event enjoy the exercise, friendship and keen competition between the teams. The way Harold Roberts tells it, this group couldn't hold a candle to the bowlers the unit once boasted, tutored by "Mr Bowl" - Capt Van Ryssel (ret'd).

A large contingent of unit personnel travelled to CFB Borden to enjoy the annual CFDS bonspiel. WO Hossdorf was one of the "draw" winners and it is rumoured that SF 711 is to be renamed the "Champagne Flight". Maj NH Andrews stopped over at the University of Toronto after the bonspiel to give a presentation on evaluation, diagnosis and prognosis in periodontics to the post-graduate students in periodontics.

Diplomacy was out, fine curling was
n as WO Christiansen, WO Lambert, Cpl
arnes and an unnamed lead, picked up
wo trophies from the Field Ambulance
eague at Gagetown.

Two local sharpshooters, WO L Peverill
nd Sgt Pink, took a one-day small arms
amiliarization course at the Bedford
ange. WO Peverill claims this course
as helped him clean teeth better and
gt Pink is now producing dentures with
ullet holes on request.

11 - DENTAL UNIT

by Sergeant R.S. Walker, CD

ew CO

LCol AG Taylor became the commanding
fficer of 11 Dental Unit on 15 January.

ld CO

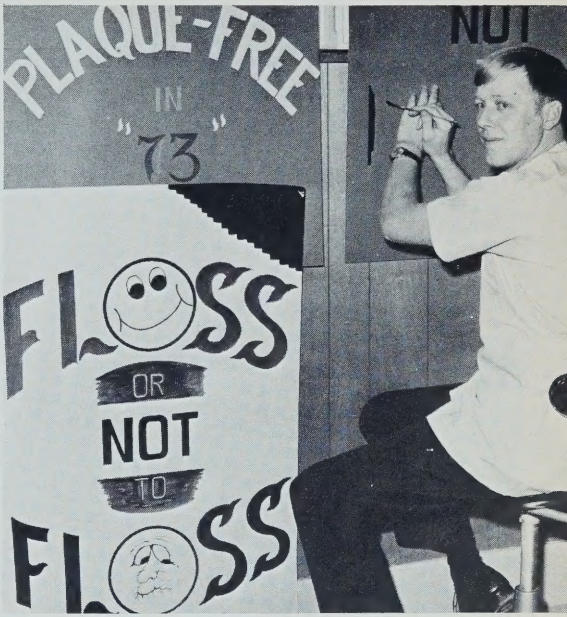
A dance was held in the POs' Mess,
MCS Naden, to say farewell to LCol and
rs DH Protheroe. LCol Protheroe leaves
o take over command of 12 Dental Unit.

etirement

Major John Eadon was presented with a
ilver tray at a luncheon held on the
ccasion of his retirement from the
anadian Forces.

o Floss or Not To Floss

That was the question when the dental
taff at Chilliwack got into the act
long with the B.C. College of Surgeons.
he idea and multi-media type advertis-
ng was laid on by the College through-
ut B.C. It was decided to use the Base
ewspaper for a one-punch shot and keep
he idea in front of Cdn Forces members
nd their dependants by means of post-
rs placed in busy areas on the Base.
Cpl Pete Hansen volunteered for the
ob of originating the posters and after
uch begging and borrowing, supplies
ere amassed in the clinic coffee room
hich took on the appearance of an art-
st's workshop minus the skylight. Pete
ook brush in hand and came up with
some original and clever ideas, as the
photo below shows.



The theme used was "Floss helps maintain a bright smile for many years."

Brush Off

During a recent brush-in for Francophone officer cadets at Chilliwack we were in the process of examining and charting for condition entry purposes. Because of the small waiting area in the clinic, there was an overflow of cadets waiting outside and they were being called in ten at a time.

Sgt "X" from the base came in on a routine dental enquiry and on his way out was asked to send in ten more. Now this NCO, being extremely regimental, steps outside the door, calls the waiting group to attention, and orders Officer Cadet Tenmore to step forward. After much confusion in this group of French speaking cadets, Sgt X came back into the clinic with the news that Cadet Tenmore was not outside.

The clinic staff could do no more than thank the NCO and hope he would depart before the laughter broke out. Sgt X has now been dubbed "Sgt Tenmore" by the clinic staff (but not in public).

Sports

Fifteen members of the Naden clinic

set out on a 3,500 mile run from Halifax to Victoria on 8 January. As of the end of March they have reached Sault Ste Marie, for a distance of 1,629 miles. More details in the next issue ...

A rink comprising of Capt Jim Fennell, (skip), CWO Wardell (vice), Capt Don Graham (2nd) and Maj (ret'd) Tom Erskine (lead), won both the "A" Group and Club Championship at the Victoria Curling Club ... We are also proud that a rink skipped by Jim was the "Best at Borden", returning home with the "A" Trophy.

Capt Doug Watson received a trophy for capturing the largest spring salmon in the Peddar Bay Fishing Club in 1972 - 29-1/2 pounds.

CF DENTAL SVCS SCHOOL

by Sergeant R.K. Delmage

Visits

On behalf of the Canadian Dental Association, a team consisting of Dr BP Martinello and Mrs S French visited the School 12-15 January to conduct an accreditation study of the Dental Clinical Assistant and Dental Therapist trades.

Forty-four members of the Toronto Academy of Dentistry toured CFDSS facilities on 14 March and attended lectures on oral photography by Maj JOL Bourget, and oral pathology for general practitioners, by LCol JJN Wright.

LCol LA Reynolds and CWO Mike McDonald discussed civilian training of dental assistants and dental hygienists at the University of Alberta and the Northern Alberta Institute of Technology in Edmonton, 28 January-2 February.

LCol HW Brogan made a two-week liaison visit to Viet Nam in February.

WO Doug Davies attended a Ticonium Business Conference in Chicago 10 Feb.

Maj DNH Charles attended a conference of the Chicago Dental Association in Chicago, 11-14 February.

Leave

This year's participants in the annual winter migration included Capt Mike Pilon who escaped to Australia, and Mrs C Clark and Cpl Hab Habberjam to the Bahamas. Mrs Clark attests that even a sunburn can be an advantage ...

Retirements

MWO EE Mazerall is retiring after 33 years in the Cdn Forces at the end of May. Hailing from Springhill, N.S., Earle began his career at 17 with the North Nova Scotia Highlanders in 1940. He went active in 1942 as a dental assistant and served in several clinics in the Maritimes during the second World War. As a sergeant, he had a one-year tour with 27 Cdn Inf Bde in Europe in 1951. In 1954 he remustered to Adm Clerk and since 1966 has been the superintending clerk at CFDSS. While in Borden, Earle has expended much time and effort in making the annual CFDS bonspiel both an unqualified success and an event to which all members of the CFDS could look forward to every year. No one who has ever attended a course at the School can ever forget Maz as the "miracle worker" in solving administrative problems and lending a sympathetic ear to problems which couldn't be solved. Earle and his wife Jean have no immediate plans for retirement.

CWO Keith Laurence, senior laboratory instructor at the CFDSS, receives his warrant scroll from the Commandant, Col LG Craigie. From Owen Sound, Keith began his career as a dental technician in July 1940. He served in England and North West Europe and left the Forces in January 1946. He re-enlisted in May 1951 and served in Germany, England, France, Winnipeg and Halifax before being posted to CFB Borden in August 1968.

WO RJ Goodwin leaves for retirement
h 24 years service. Bob joined the
Volunteer Reserve at 17 and served
sea aboard HMCS Woodstock and HMCS
nda from 1944 to 1946. He returned
civilian life and served a five-year
renticeship as a dental laboratory
hnician in Prince Albert, Sask. In
l he joined the RCDC in Regina and
served in Winnipeg, Saskatoon, Moose
, Marville and Petawawa. He came to
CFDSS in June 1969 as a member of
dental lab technician instruction
m. Bob, his wife Marguerite and two
ldren will make their home in King-
n where Bob has a new job waiting
the Kingston General Hospital.

Meet

aj Dave Charles, Capt Dave Hodges and
George Payette formed a three-man
Nordic team representing CFB Borden in the Ontario Regional Ski Meet held at Calabogie 29-30 January.

The Nordic events were held over an extremely rough seven kilometre course, and the large number of skis broken attested to the difficulty of the trails. In the individual event, Capt Hodges was 8th (96 min 30 sec), Cpl Payette was 11th (106 min 30 sec) and Maj Charles was 12th (107 min 30 sec). In the team relay event, the CFDSS Borden team finished 3rd out of five teams, with a time of 152 mins 56 secs - only four minutes out of second place.

Although all three team members were chosen to represent the Ontario Region at the Nationals, no one was able to attend because of previous commitments.

35 - FIELD DENTAL UNIT

by Sergeant W.B. Looker

Visits

BGen GC Evans visited the unit 14-19 February. He inspected the clinics and conducted personal interviews.

LCol JM Donely made a staff visit (paid holiday) to SHAPE in January.

In The Field with 35

Each year the number of field exercises seems to increase as does the length of each. REFORGER may not mean much to most people back in Canada, but in Europe it tends to cause cold shivers to run up and down one's spine. This year it was seven weeks (January-February) in the field. Taking part were Maj McInnis, Sgt Wormington, Capt Morrow and Cpl Bernier from Baden, and Maj Ringland, Sgt Looker, Capt Gish, MCpl Jones, Maj Boucher, and MCpl James from Lahr. Also soon after that period, just so the unit wouldn't get too rusty, there was Exercise WINTEX (ten days), with Capt Schroeter, MCpl James and MCpl Jones taking part. We seem to have the game half beaten now as there should be only ten weeks (Munsingen and Hohenfels) of field training left for this year.

Leave/Sports

With the end of the leave year approaching, there is the usual mad rush to finish off remaining leave, and coupled with good snow conditions, many have been taking to the slopes in Austria, Switzerland and Germany with nary a broken bone.

However, this does not hold true for a rough and tough volleyball player. During a recent game, Maj Brian Yates of the Baden clinic team found it would have been better to land on his feet rather than his hands in spiking a ball. The result - a broken arm.

14 - DENTAL UNIT

by Lieutenant P.D. Peterson

Visits

LCol JJN Wright lectured on oral pathology at the Toronto Academy of Dentistry, 12-15 March.

Maj IW Susser and MWO EK Abernethy presented a two-hour lecture to the first year dental hygiene students at the University of Manitoba Dental School 12 February.

Prairie Patter

MWO Fraser was one of a group of CFDS Pay Level 7 and 8 dental therapists to appear before a Cdn Dental Association accreditation board at the CFDSS 5-14 January. The board was evaluating hygienists training in the CFDS.

WO N Cable, an avid scuba diver, became a member of the CFB Cold Lake Search and Rescue Standby team, available if needed in emergencies.

Sports

Pte Rathbone participated in the Cdn Forces Zone Curling Championships in Winnipeg as a member of the CFB Cold Lake servicewomen's curling team, 5-8 February.

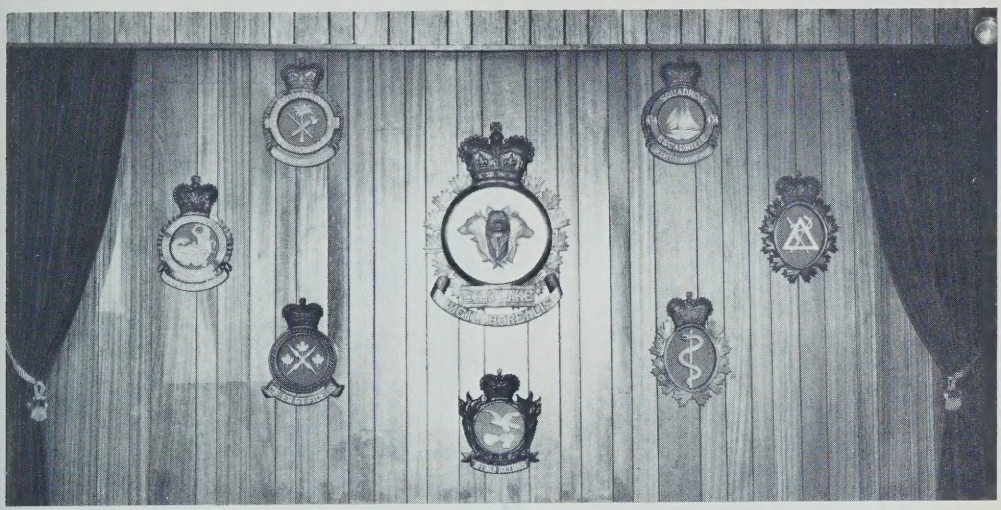
Pte Heinrich was a member of the CFB Cold Lake servicewomen's badminton team competing in the Canadian Forces Zone Championships at Esquimalt, 11-15 Feb.

A mixed invitational bonspiel involve curlers from clinics in Edmonton, Calgary, Cold Lake, Penhold and Alsask in Edmonton, 17 February. Altogether ther were 64 curlers, and the event was so successful that a repeat performance will be held on 23 February 1974.

Maj Collier was chief organizer, drav master and also skipped a rink. Prizes were won by rinks skipped by:

1st - Capt CG Milne, Cold Lake
2nd - Maj VO Bergland, Edmonton
3rd - Cpl JJ Vasek, Edmonton
4th - Capt EM Lobb, Edmonton.

Capt TA Rawlyck demonstrated his expertise with handguns and was recently awarded two CIL handgun trophies - the Master's Gold and the Expert's Silver.



The new CFDS crest is a recent addition to the wall display of unit crests in the Officers' Mess at CFB Cold Lake. Crests surround the CFB Cold Lake crest. From upper left and clockwise: 417 Squadron, 434 Squadron, CFDS, CFMS, 1 CFFTS, 742 Communications Squadron and the Engineering & Test Establishment.

13 - DENTAL UNIT

by Lieutenant J.W. Shore

he Professionals

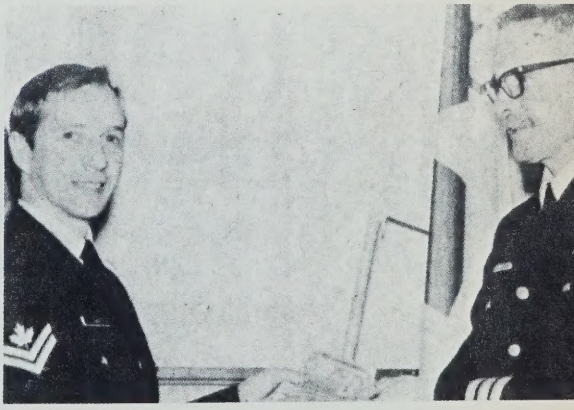
Maj H Griesbach, Capt F Giesbrecht and apt M Kropinak attended a two-day seminar of the North Bay and District Dental Society, 30-31 January.

MCpl WR McIntosh was the guest speaker t the February meeting of the North Bay nd District Dental Assistants' Society. Cpl McIntosh's presentation was "Mercry Contamination - Hazards and Precauions".

A dental health presentation was given y Capt MS Bouris and MWO RF Matheson o service personnel and their dependants t the AMDU Social Centre, CFB Trenton, 9 January.

Capts Bouris and MacKenzie, MWOs Mathson and Kidd and Mrs Joan Macklin of he CFB Trenton detachment assisted members of the Quinte Dental Society and their auxiliaries in a practical demonstration of correct brushing and flossing techniques during Dental Public Health Week. Col WR Thompson assisted in judging a school poster competition on preventive dentistry for Grade 8 students during this period.

Club 100 Winner



MCpl GE Sykes was presented with five crisp $20 bills by LCol MA Gray, BTSO, CFB North Bay. MCpl Sykes was a winner during the North Bay Winter Carnival festivities.

IN ... and OUT

Lt JW Shore has assumed the functions of Admin Officer for the unit. Jack comes to us after a three year tour with 3RCR at CFB Petawawa - fully combat trained ... Sgt EJ Schultz has arrived on posting and promotion from the CFDSS ... Capt LR Hatcher has departed for greener pastures. LaVern is on the Logistics Officer Course at CFSAL, Borden, from March to August. After the course he hopes to arrange a posting of his choice. Col WR Thompson presented LaVern with a CFDS Crest on departure ... Cpl AH Peck departed on a tour of duty to Cyprus, March to September ... Sgt GM Anderson was posted to Comox in January.

Sports

Capt DB Smith stood third in the overall combined times at the Canadian Forces National Ski Finals in Banff, 26 February-2 March ... Maj DG Jones and Sgt JR Curtis achieved 2nd place to CFB Cold Lake in the Cdn Forces Curling Playoffs at CFB Shilo, 12-16 February ... Capt F Giesbrecht was a member of the badminton team representing CFB North Bay in the Cdn Forces Northern Ontario Divisional Playoff at CFB Petawawa on 21 February ... Several members of 13 Dental Unit were in the eleventh annual CFDS bonspiel. From various reports received from the returning warriors, all personnel enjoyed this opportunity to display their curling skills and to rub shoulders with old friends and new acquaintances.

DENTAL DET CYPRUS

by Captain P.W. Williams

The tooth fairies have enjoyed their sojourn with 2PPCLI in Cyprus. It was a new and enjoyable experience for some and a chance to re-establish friendships for others in working with the battalion. Many new friends were also made with members of the other contingents. The six months have passed quickly.

Cyprus - from the scintillating sands of Famagusta to the dark primordial pits of Ellen's Bar - from the tranquility of Kyrenia to the cacaphony of Ledra Street, will be remembered by all. *(This paragraph has qualified Capt Williams for a seat on the Editorial Board of the Quarterly - Ed.)*

Pictured above are the 2PPCLI plaque assault company. Capt Paul Williams is conducting the examination and Sgt Barry Mackie is preparing the "Keo" mouthwash with Sgt Dan Hardy ready to reinforce when required. This patient reported one snowy January morning complaining of jungle mouth.

15 - DENTAL UNIT

by Lieutenant V.W. Kwasnik

Back On The Job

Maj Arpin underwent heart surgery at the Ottawa Civi Hospital on 16 January. He made a good recovery and is now back on the job at CFB St Jean clinic.

Sports

WO Fathers attended a Bowl-a-Thon in St Hubert on 22 March. He bowled from 2000 hours to 1000 hours the next morning, turning in an average of 180 for the twelve hour effort.

Capts Cote and Lemieux were members of he Valcartier hockey team at the Cdn orces Hockey Tournament in Greenwood .S. 23-30 March. The Valcartier team ere runners-up in this tournament.

Capt Roy participated in the Zone 6 admintón tournament finals in Valcart-er on 17-19 March.

Our second unit bonspiel was held at t Hubert 15 February. The worst snow-torm of the season produced extremely azardous driving conditions that morn-ng, and for awhile we considered post-oning the event. However, rinks from St Jean battled their way through the storm and arrived right on schedule. LCol Begin's rink took top honours. WO Father's rink from the St Hubert clinic were runners-up.

The 'Spielers ...

The Winners ... Capt Ayotte, Capt Roy, MWO Torrens and LCol Begin.

66 YEARS OF SERVICE. *Col G MacDougall presents 1st clasps to the CD to (left to right) Capt JR Savoie, Cpl HE Lubitz and MWO M Beauvais, 17 April.*

1 ~ DENTAL EQPT DEPOT

by Lieutenant J.J.L. Lamontagne, CD

Visits

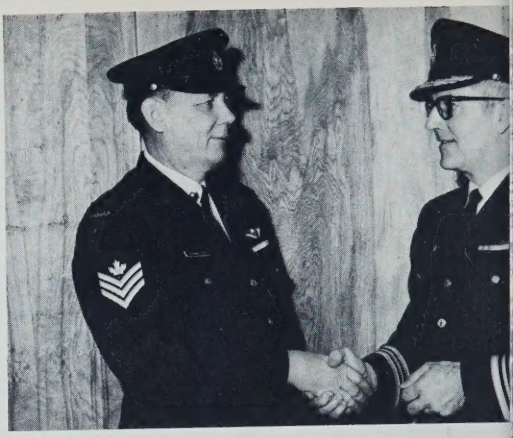
Maj MB Fisk attended the ATC Commanders' Conference 30-31 January in Trenton. The CDS, Gen JA Dextraze, gave a briefing on the re-organization of NDHQ and answered questions on dress and conditions of service. Maj Fisk recently visited clinics at North Bay, Kingston, RMC, Trenton and Ottawa.

Personnel

After 11 years with the CFDS, Lt RJ Rutledge has reclassified to MAO and is now serving with the CMED ... Sgt Paul Dumas is undergoing (over going?) para training ... MCpl CC Shave has been posted in from Halifax.

Major and Lieutenant (Mrs) Fisk (recently promoted in the Militia), attended a candlelight dinner in the Officers' Mess, Lanark and Renfrew Scottish Regiment, Pembroke on 17 February. The occasion was a general inspection of the Regiment by the Commander, Ottawa District, Col Gillespie. The haggis was piped in by a none too sober piper. Lt (Mrs) Fisk has decided that Maj Fisk would not look too appealing in a kilt.

Lt JJ Lamontagne, 1 DED Supply Officer receives his commissioning scroll from Maj Fisk.



Sgt Carl Schmelzle being congratulated by Maj Fisk on being awarded the First Clasp to the CD.

Sports

13 Dental Unit collaborated with 1 DED and hosted a day of curling on 19 January. Four rinks from Ottawa competed against four rinks from Petawawa for a locally manufactured trophy. Conceived at the Depot, the trophy consists of two plaques, one bearing the front half of a horse, the other the rear half. The results of the contest were predictable. Petawawa rinks, with the highest number of aggregate points, retained the horse head, while Ottawa, alas, was left with the horse's a...

Mrs Fisk skipped a ladies' rink and won the B Event at the Rhine Valley Curling Club, Lahr, during the last week of February.

1 ~ DENTAL UNIT

by Warrant Officer JW Patterson

Bonspiel

1 Dental Unit held their third annual bonspiel at the Uplands Curling Club on 6 April. Eight rinks competed in some of the most awkward and exciting curlin ever witnessed in the Ottawa Valley.

MWO Tommy Sullivan squeaked through to ..s third consecutive victory in this ..emier event. BGen Evans is still won..ering how Tommy did it, since the Gen..al appointed himself official score..eeper.

Interest was high, competition keen, ..d everyone is looking forward to next ..ear's 'spiel. There must be *some* way ..o beat Sullivan!

WINNING TEAM. *Trophy presented by ..Gen Evans to MWO Sullivan, Mrs Aubin, ..s King and Cpl Kallman.*

SECOND EVENT WINNERS. *Prizes present..d by MWO King to Maj McDermott, Sgt ..indsay, Miss Hyndman and Maj Wood.*

THIRD EVENT WINNERS were WO King, ..apt Cherun, Mrs McNamee and Maj Cyrenne.

THE PRIZE FOR THE RINK THAT TRIED (??) THE HARDEST was won by Maj Budzinski, Capt Jackson, Capt Carver and Cpl Nolet.

The occasion also served to wish Capt Floyd Jackson the best of luck on his posting to CFB Chilliwack.

Postscript

Received too late for the January 1973 issue, the photos below show WO Piche being feted at his retirement party in November.

DENTAL SVCS NDHQ

Recently at NDHQ, three Division officers were presented with Second Clasps to their Canadian Forces Decorations by BGen Garth C Evans, the DGDS. The award is indicative of 32 years service in the Canadian Forces.

Col GR Covey began his service career in April 1941 and has served in a variety of postings including Commanding Officer of 25 Canadian Field Dental Unit in Korea and 35 Field Dental Unit in Europe, Senior Operator 15 Dental Company, Commandant of the Canadian Forces Dental Services School, and several appointments in the Division of Dental Services to the present as Director of Dental Treatment Services.

Can retirement be far away?

LCol JW Fletcher was one of the "early birds", having enrolled in September 1939. He progressed through a number of administrative, adjutant and quartermaster appointments, including a combined Adjutant/Quartermaster tour with 25 CFDU (Korea) and Commanding Officer of 1 Dental Equipment Depot. He is now serving in the Directorate of Dental Plans and Requirements (Procurement and Finance) in the Division.

Maj RG Peebles enrolled in April 1941 and following several postings in Canada, proceeded to the UK and North-West Europe (Occupation Force). After the war he "lucked in" for a two-year tour aboard HMCS Ontario, followed by a number of administrative appointments, the most recent being Adjutant of the CFDSS and now Military Secretary to the DGDS.

Of interest, the combined service of those shown in the photo is 127 years.

Professional Training

US Naval Dental School

Removable Partial Dentures
Maj EFA Foley, 22-26 January

Preventive Dentistry Continuing Education Seminar
LCol JVP Chatwin, 5-9 February

Oral Pathology
Maj DL Brown, 8-12 January

Complete Dentures
Maj WR Collier, 26-30 March

US Institute of Pathology

Oral Pathology
Maj JW McNeill, 19-23 March

Cdn Forces Training

CF Dental Services School

Dental Therapist PL6B Revision
MWO JA Fraser, 8-12 January

CF School of Management

Middle Management
Capt ET Dalzell, 13 February-7 March

Advanced Management
Maj GR Nye, 6-23 March

CF School of Administration & Logistic

Basic Logistics, Officers
Capt LR Hatcher, 12 March-10 August

PSPT/Administrative, 8 January-16 February
Lt PD Peterson, Capt W Jackson, Lt JW Shore, Lt DE Fraser

F Staff School

Junior Staff Officers
Capt KR Morley, 20 November-2 February
Capt MS Bouris, 12 February-20 April
Capt DA Graham, 19 February-19 April

F Medical Services School

Basic Medical Associate Officers
Capt B Vandervaart, 16 January-9 February

First Aid Instructors
Sgt DW Mason, 14 December-15 January

First Aid
Sgt A Busse, 15 February-15 March
Sgt RK Delmage, 26 March-19 April

F School of Instructional Technique

Audio-Visual Aids
CWO MO MacDonald, 22-26 January
CWO KE Laurence, 2-6 April
CWO JH Sadler, 2-6 April

Instructional Technique
Cpl PJ Mehler, 29 January-17 February
Cpl LW Parker, 29 January-17 February
Cpl I Winsor, 29 January-1 February
WO JA Christiansen, 19 February-2 March
Sgt W Kasowan, 15-26 January

Training with Industry

reat West Life Assurance Company

Financial Management
Col LR Pierce, 23-24 January

Promotions

Major

DA Graham, G Gunther, JF Fearon, RD Carver, RI Stammers

Lieutenant

PD Peterson, JW Shore

Warrant Officer

JF Giroux, LI MacLean

Sergeant

EJ Schultz

Master Corporal

RC North, JN McKenzie, JJ Pouliot, CJ Beauchamp

Corporal

LJ Cote, D Bowering

Honors and Awards

Canadian Forces Decoration

Sgt MG Olinik, Sgt D Ellis, Sgt SJ Kirley, MCpl PR Coss, Cpl AM Alkenbrack, Cpl P Maelde, LCol LA Reynolds, Sgt A Busse, Maj PR McQueen, MCpl WH Renwick.

1st Clasp to Canadian Forces Decoration

MWO JA Fraser, Capt JR Savoie, Cpl HE Lubitz, Sgt JP Dignard, MWO M Beauvais, WO MA James, Sgt W Kosowan, Sgt CE Schmelzle.

2nd Clasp to Canadian Forces Decoration

Capt EM Lobb, LCol JW Fletcher, MWO G Bradley, Col GR Covey, CWO HC Bilbey, Maj RG Peebles.

Statistics of the Preventive Dentistry Program for the Canadian Forces indicate that 86.4% of the service members received their Phase I/Annual recall in the last year, and that 67.7% of the Canadian Forces were dentally fit as of 31 March 1973.

Welcome - Bienvenue

A cordial welcome to the Canadian Forces Dental Services is extended to: Mrs JL MacLean, Lt JW Shore, Mrs L Audet, Pte DM Brasseur, MCpl MR Veilleux, Cpl J Brisebois, Pte JB Bolduc, Pte JC Poulin, Cpl(W) M Brosha, Cpl AW Leach, Pte(W) JI West, Pte(W) SM Langwold, Cpl JV Thompson, Pte JGRR Bernier, MCpl RG Buxton, Cpl DG Hogan, Pte DM Brasseur, MCpl(W) N Creelman, Cpl JD Angus, MCpl RF Buchanan, Pte(W) HAS Dijkstra, Cpl JPHJ Larivee, Cpl MG Gemee, Pte JJ Boulay.

Farewell - Au Revoir

The best of luck to: Mrs H Bernard, Maj JF Eadon, MWO RG Hopkins, Sgt JGA Cote, Mrs C Morrissette, Sgt RJ Stenabaugh, Mrs K Winkler, Pte(W) MG Boivin, MCpl RC North, Capt PA Wood, MWO RJ Goodwin.

Vital Statistics

Marriages

Congratulations and many years of happiness to: Capt Marie Ginette Ouellet and Maj GD Petrie.

Births

Sons: Capt and Mrs EJ Morrow; Capt and Mrs DA Meredith; MCpl and Mrs CJ Beauchamp; Capt and Mrs JM Cherun.

Daughters: Capt and Mrs R Orenczuk; Sgt and Mrs MG Olinik; Capt and Mrs JC Ayotte; MCpl and Mrs RL Solomon; Sgt and Mrs GG Albertson; Sgt and Mrs JG Labrosse; Capt and Mrs JLR Larose; Sgt and Mrs GM Anderson; Sgt and Mrs C Heather.

Condolences

Deepest sympathy is extended to: Cpl JA Riel on the loss of his wife; Maj Boucher, Sgt M Longford, WO GM Wadden, and Sgt PJ Mehler, on the loss of their fathers.

In Memoriam

We have learned with regret the sudden passing of Sergeant Robert Gerald Brighty on 6 May 1973 following a heart attack. Sergeant Brighty has been a member of the Summerside dental detachment since 1962.

Deepest sympathy is extended to Mrs. Brighty and family.

Expert tips on better writing

Since many contributors are not quite expert in the writing field, we have decided to offer the following primer. We hope that, if followed religiously, it will ease the burden on the editor. May we suggest that you clip this column and wrap it around your pencil - scroll fashion - so that it will be handy for quick reference.

A forceful type of expression is what the writer can be able to achieve following perusal of the following rules as to good usage and grammar which all writers ought to be appraised of.

1. Subject and verb always has to agree.
2. Being bad grammar, the writer will not use dangling participles.
3. Parallel construction with coordinate conjunctions is not only an aid to clarity but also is the mark of a good writer.
4. Do not use a foreign term when there is an adequate English pro quid pro.
5. If you must use a foreign term, it is de rigor to use it correctly.
6. It behooves the writer to avoid archiac expressions.
7. Do not use hyperbole; not one writer in a million can use it effectively.
8. Avoid cliches like the plaque.
9. Mixed metaphors are a pain in the neck and ought to be thrown out the window.
10. In scholarly writing, don't use contractions.
11. A truly good writer is always especially careful to practically eliminate the too-frequent use of adverbs.
12. Use a comma before nonrestrictive clauses which are a common source of difficulty.
13. Placing a comma between subject and predicate, is not correct.
14. Parenthetical words however should be enclosed in commas.
15. Consult the dictionery frequently to avoid misspeling.

(Major H Griesbach, CFDS, Editor, CFB North Bay "The Shield")

The R.C.D.C. School was located at 541 Sussex Drive at the corner of George, in Ottawa, prior to being relocated in 1957 to Camp (now Canadian Forces Base) Borden.

DENTAL

The CANADIAN FORCES DENTAL SERVICES Quarterly

VOLUME FOURTEEN · NUMBER TWO · JULY 1973 ·

The CFDS Quarterly

·VOLUME 14· NUMBER 2· JULY 1973·

Published by authority of Brigadier-General Garth C Evans, CD, QHDS, DDS, FICD, i April, July, October and January, The Quarterly serves as a means for the exchang of ideas, experiences and information within the Canadian Forces Dental Services Views and opinions expressed are those of the authors and not necessarily those o the Director General of Dental Services or the Department of National Defence.

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Cover Photo

Capt JW Turner (right) with cohorts Sgt GF McKay (left) and Sgt GEC Bradley (centre) aboard HMCS Ontario in Pearl Harbour, Hawaii, 1947. (See page 27)

The CFDS Quarterly may be subscribed for at $6.0 per year by writing to:

The Director General of Dental Services,
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K1A OK2.

Complex Odontome of the Mandible Associated with an Impacted Cuspid

Major G.R. Nye, CD, BA, BSc, DDS.

AUG 22 1973

Lt J.A.G., a 21 year old Caucasian ale, was seen following evaluation for partial denture.

A periapical radiograph *(Fig 1)* provid- d by the referring dentist, revealed a ense radiopaque mass between the roots f the lower right lateral incisor and ne first bicuspid, with an impacted oth inferior and distal to the mass.

linical Examination

The gingival tissues and oral mucosa ere normal. The second bicuspid and irst molar on that side had been remov- d when the patient was a child but the emaining teeth were in good condition.

There was a slight lateral expansion f the buccal plate in two areas of the ght mandible caused by the cuspid own in the area of the second bicuspid nd the mass between the roots of the ncisor and first bicuspid. A slight de- iation of alignment in these teeth re- ilted in a clinical contact between neir crowns. There was no facial asym- etry associated with the expanded buc- al plate which was firm and did not ompress.

adiographic Examination

The mass, circular in shape and about cm in diameter *(Fig 1)*, was situated etween the divergent roots of the lat- al incisor and first bicuspid.

A thin radiopaque line surrounded the ass. The numerous tooth-like structures bserved in one radiograph *(Fig 2)* were ndicative of a compound odontoma.

se Evaluation and Treatment Plan

From the clinical and radiographic ex- mination it was evident that the first cuspid would be critical to prosthetic eplacement of the missing second bi- cuspid and first molar. Thus a treatment plan was devised to ensure the stability of this tooth.

Although odontomas are frequently associated with normal unerupted teeth, they are not usually attached[1] and radiographs indicated that such was the case in this instance.

The elected treatment plan called for surgical removal of the impacted cuspid, followed by an evaluation of the mobility of the first bicuspid, with the option of deferred removal of the odontoma should the integrity of the bicuspid be in danger.

Treatment Procedure

A right mandibular block and long buccal injection were administered. Infiltration was used in the mucobuccal fold to control haemmorhage.

An incision was made commencing at the crest of the ridge in the second bicuspid space and extended slightly mesially and downward toward the mucobuccal fold. The distal incision was carried 1 cm along the crest of the ridge, then downward to the junction of the attached gingiva and the vestibular mucosa.

A flap was raised, the mental neurovascular bundle identified and bluntly dissected. The distal incision extending the flap inferiorly was then completed.

The mental foramen area was covered with a broad mucoperiosteal retractor to protect it from trauma and the plate of buccal cortical bone removed using a slow speed surgical bur with irrigation.

The crown of the impacted tooth was exposed, sectioned at the cemento-enamel junction and then removed with a Coupland elevator. A traction point was

placed in the root which was then elevated without difficulty.The surgical site was irrigated, the bony edges filed and the developmental sac removed with a curette. The first bicuspid was slightly mobile and so the flap was closed with three 000 black silk sutures and a moistened gauze sponge placed in the buccal fold for additional support to the repositioned flap.

Post-Operative Course

The patient was placed on routine post operative care, including a soft diet and advised of the possibility of temporary paraesthesia. After seven days, sutures were removed and healing was found to be progressing normally except that paraesthesia in the distribution of the right mental nerve was evident.

The patient returned in six weeks time requesting an appointment for the second operation and reported that for the past two weeks there had been no evidence of numbness.

Healing was progressing well and the gingiva over the operation site was normal. The first bicuspid was firm and vital.

Radiographically,the surgical site appeared similar to the post-operative view *(Fig 3)*.

Treatment

The patient returned two weeks later and anaesthesia was obtained as in the first operation. An incision was made between the right central and lateral and carried obliquely downward and forward to the right of the mid-line.A distal incision was made opposite the bicuspid and carried straight downward to avoid entering the site of the first operation.

The flap was elevated, revealing a slightly bulging buccal plate which was rough in texture and very thin.

The bone was removed, creating a triangular window to expose the encapsulated mass *(Fig 4)*. The odontoma was removed in toto, with special care being taken to avoid lateral pressure on the bone supporting the lateral incisor and the first bicuspid.

The underlying bony crypt was curetted to remove connective tissue *(Fig 5)*. The

Fig 1. Periapical radiograph showing bicuspid, impacted canine and odontoma situ.

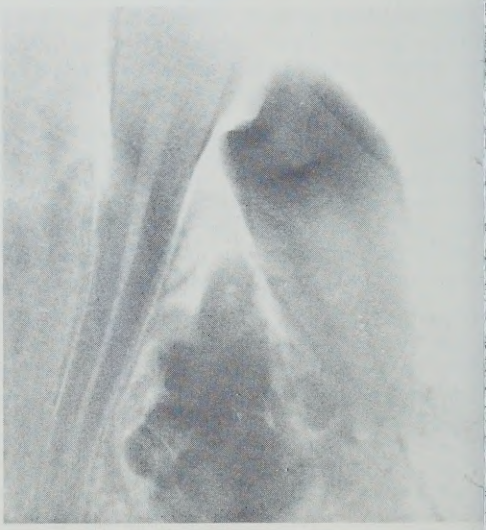
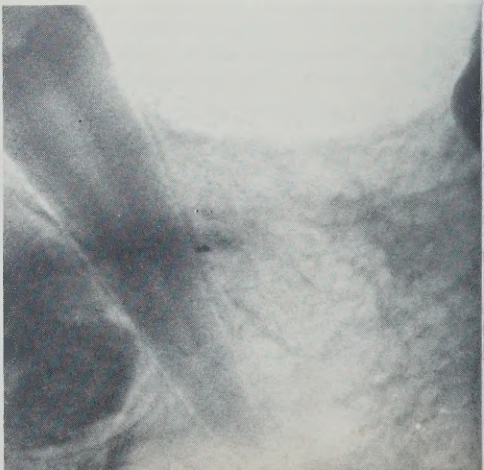


Fig 2. Periapical radiographic showing characteristics of a compound odontoma

Fig 3. Periapical radiographic 6 weeks after removal of impacted canine.



ges of bone were rounded off, the flap positioned, four 000 black silk sutes placed and a post-operative radioaph was taken *(Fig 6)*.

The first bicuspid was slightly mobile d the lateral incisor was firm.

boratory Findings

The specimen consisted of an encapsuled globular, spherical mass, 1 cm in ameter, stony hard in consistency. It s photographed *(Fig 7)*, placed in a ecimen bottle containing 10% formalin d forwarded to the Oral Pathologist at e University of Toronto in accordance th the recommendations of most authories that all odontomas be microscopicly examined.[2,3]

The report was as follows.

Gross: The specimen consisted of a ngle hard mass of calcified dental ssues invested by a thin soft tissue. e specimen was photographed, then cut half and photographed again to show e cut surface *(Fig 8)*. It was then delcified and histological sections prered.

Microscopic: Examination revealed a xture of dental tissues lacking comete morpho differentiation. There is a rge mass of dentin covered by cementum er one half its length. The remainder covered, in part, by enamel matrix of rying thickness. Attached to this malrmed tooth-like structure is a jumbled ss containing further enamel matrix, ntin and cementum. About the whole, ere is a partial encapsulation of a ll collagenized connective tissue*(Figs , 11)*.

Diagnosis: Complex odontome.

st-Operative Course

Routine post-operative care was prescribed and no antibiotics administered. aling was uneventful and there was no idence of paraesthesia.

The patient went on course shortthereafter and his follow-up examinaon was carried out at CFB Gagetown ven weeks later.

The report stated: "Clinically, the ea was healed; the soft tissue appearce, colour and texture were normal. ere was no demonstrable soft tissue elling or expansion of the bone. On

Fig 4. Surgical site after removal of buccal plate.

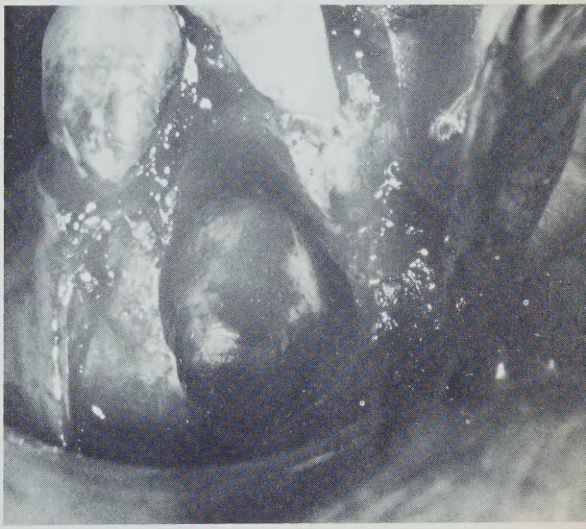
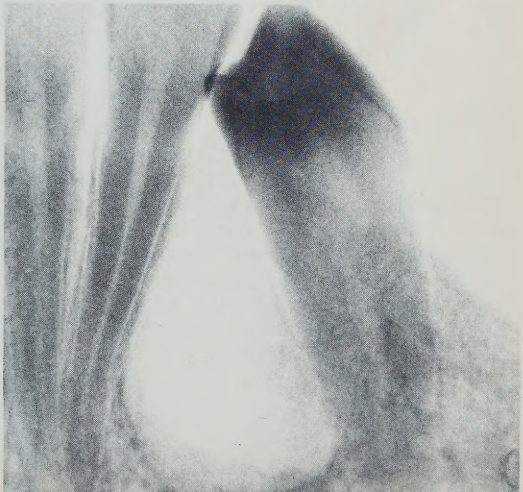


Fig 5. Surgical site after removal of odontoma.

Fig 6. Post-operative periapical radiograph showing supporting bone of $\overline{2}|$ *and* $\overline{4}|$ *adjacent to the surgical site.*



pulp testing, both the lower right first bicuspid and lateral incisor responded. These teeth were not sensitive to cold air or percussion and were not mobile.

The patient had no complaint of pain or paraesthesia."

Discussion

As is frequently the case with odontomas, the first clinical indication was the absence of the cuspid.[4] From radiographic evidence the odontoma was first diagnozed as compound, but microscopic examination revealed it to be a complex odontoma. Colby et al[3] state that occasionally features of both types are evident in a single case and qualify that the designation of the lesion should be determined by its most predominant characteristic.

Sproule[5] states that most odontomas are developmental anomales and often develop during tooth formation, sometimes replacing a tooth of the normal series. According to Tratman,[6] complex composite odontomas originate from aberrations of a normal or a supernumerary tooth germ. As was demonstrated in this case, the odontoma may be in close proximity to the tooth it displaces without continuity. From the macro-section, the odontoma would appear to be derived from a supernumerary deciduous molar. This is not the usual finding. Shafer[2] points out that when there is a morphologic resemblance to teeth, the structures are single rooted.

Summary

A case of a small odontoma which displaced and impacted a cuspid in close proximity to the mental foramen has been reported, with clinical radiographic and histological findings. Post-operative results were very good.

Acknowledgements

I am indebted to Col WR Thompson, consultant Oral Surgeon, for his advice; Professor HA Hunter, Oral Pathologist, for his report and micro-photographs; and to Maj GD Petrie for his post-operative report. MWO MM Fediuk took the radiographs from which the illustrations were produced.

References

1. Archer, W.H., *Oral Surgery, 3rd Ed.*, Philadelphia and London, Saunders, 1961, p. 413.
2. Shafer, W.C., Hine, M.K., and Levy, B.M., *A Textbook of Oral Pathology*, Philadelphia and London, Saunders, 1960, pp. 190-201.
3. Colby, R.A., Kerr, D.A., Robinson, H.B.G., Moe, T.I., *Colour Atlas of Oral Pathology*, Philadelphia and London, J.B. Lippincott Co., 1956, p. 40.
4. Thoma, K.H., Goldman, H.M., *Oral Pathology*, St. Louis, Mosby, p. 963.
5. Sproule, J.D., *Embryonal Significance of Epithelial Odontogentic Tumours*, Canad. Dent. Ass. 33:200, 1967.
6. Tratman, E.K., *Complex Composite Odontomes*, Brit. Dent. J. 87:229, Nov. 4, 1949.

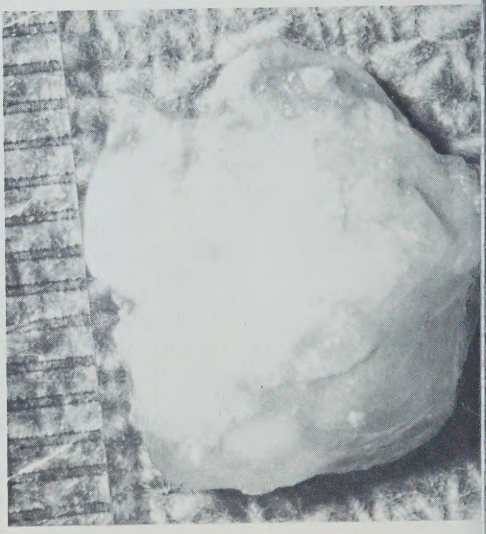
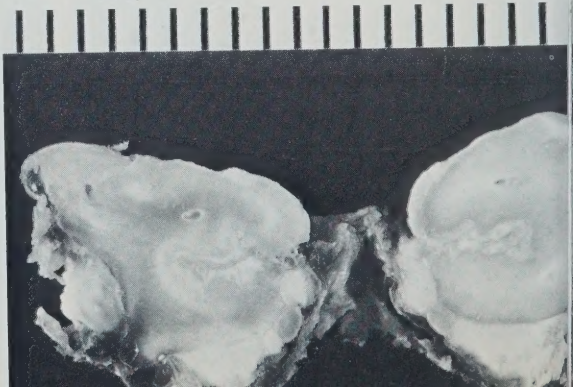


Fig 7. Gross specimen shows encapsulation of mass (scale in millimeters).

Fig 8. Sectioned gross specimen revealing tooth-like mass (scale in millimeters).



ig 9. Photomicrograph of a decalci-ied section of the specimen(40x mag)

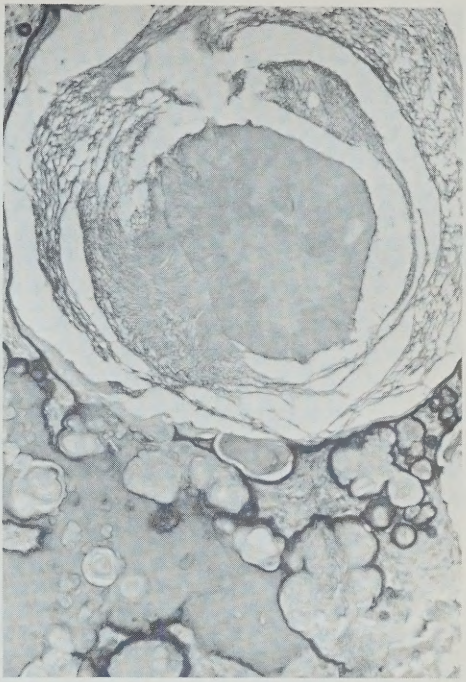


Fig 10. Photomicrograph of enlarged area of Fig 9 (100x mag)

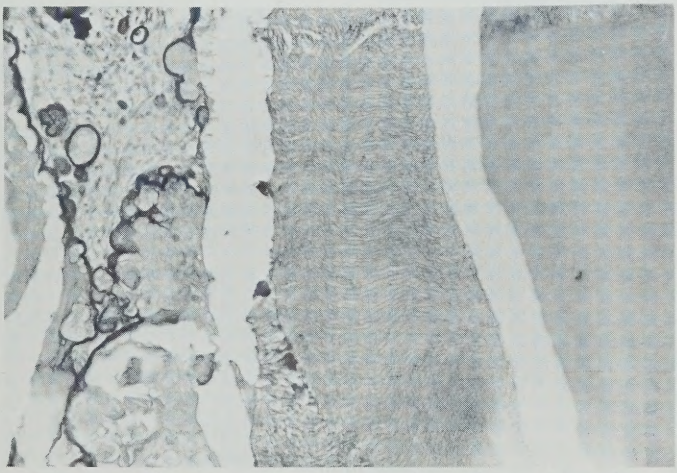


Fig 11. Photomicrograph of enlarged area of Fig 9 (100x mag)

A Study of the Relative Efficacy of Two Group-Oriented Methods for Removing Dental Plaque

Major E. F. Foley, DDS.

Introduction

Three considerations were involved in this study:

- The self-preparation exercise, in which patients clean their teeth with pumice prior to receiving a topical application of fluoride, has been approved and utilized in the CFDS Preventive Dentistry Program since its inception. Most patients dislike the technique and in some clinics self-preparation has been discontinued in favour of individualized cleaning by a therapist or dental officer. This is not a viable procedure, however, when large numbers of patients are involved and a group oriented, practical alternative, which is acceptable to most patients, appears to be required.
- Probably the main purpose of self-preparation exercises is to remove dental plaque. The CFDS Manual of Preventive Dentistry states: "Calculus and heavy stains are not removed but bacterial plaque surrounding the tooth is largely removed if self-preparation is done thoroughly."[1]
- There is growing emphasis in CFDS on the use of dental floss and the modified Bass technique of brushing, but considerable difficulty has been encountered in converting patients to this technique. There is a tendency to confuse it with the roll method used in self-preparation exercises and, when questioned during follow-up treatment after being instructed in the Bass technique, many patients only remember the roll method.

It was proposed that all these considerations might be resolved through group exercises which utilize dental floss and the modified Bass method, brushing with only water. Accordingly, a double-blind study was set up to assess the relative values of this method and the self-preparation exercise as detailed by CFDS.

Purpose of Study

To assess the relative efficiency of two methods of bacterial plaque removal:

1. the CFDS self-preparation exercise and
2. a self-preparation exercise which involves the combined use of dental floss and the modified Bass technique, brushing with water only.

Method

Ninety-seven servicemen were divided into three groups:

A. A control group of 17 patients had disclosing solution applied to their teeth and their plaque index recorded by a dental officer. This group had no further participation in the study.

B. A group of 40 patients received instruction in the CFDS self-preparation method,[2] and then had disclosing solution applied. They were told to remove the red-stained plaque by brushing with pumice in front of a mirror, using the roll method.

C. A group of 40 patients were instructed in the use of dental floss and the modified Bass technique of brushing. They were then disclosed and told to remove the red-stained plaque by brushing with water, using the modified Bass method, and by using dental floss; both procedures

to be conducted in front of a mirror.

After completing their assignment, the atients in Groups *B* and *C* received a econd application of disclosing solution. They were then examined by one of hree dental officers and their plaque ndex recorded. The examiners did not now to which group any patient belonged. Plaque index scoring was conducted n accordance with the method used in he survey of Dental Conditions of the anadian Armed Forces - 1973, which surey is currently being completed.

esults

Group *A* - Control, no brushing

Total plaque index score for 17 patients: 493.
Average score per patient: 29.0

Group *B* - Brushed with pumice using roll method

Total plaque index score for 40 patients: 902
Average score per patient: 22.5

Group *C* - Brushed with water using modified Bass method; also used dental floss

Total plaque index score for 40 patients: 382
Average score per patient: 9.5

Total Score of Surfaces

	M	F	D	L	O	
Group *B:*	181	182	167	240	132	- 902
Group *C:*	70	66	63	120	63	- 382

Differences between Average Plaque Index Scores of Groups *A*, *B*, and *C*

Group *A* 29.0
Group *B* 22.5
Difference between average score of Groups B and A: 6.5

Group *A* 29.0
Group *C* 9.5
Difference between average score of Groups C and A: 19.5

Group *B* 22.5
Group *C* 9.5
Difference between average score of Groups C and B: 13.0

scussion

The study indicates that, on the average, the modified Bass method and dental floss removes more plaque from every surface of the teeth than the pumice method. It was anticipated that the interproximal areas would be cleaned better using dental floss but it was surprising that more plaque was removed from the facial and lingual surfaces using the modified Bass method with water than with the roll method and pumice.

It is also of interest that the average score using the pumice method was only 6.5 less than the control group.

Some of the possible explanations for these results are:

- Patients dislike using pumice; consequently they are less cooperative and put less effort into cleaning their teeth.
- With the roll method they miss the area next to the gingiva since they are warned to avoid brushing the gums.
- When the mouth is filled with pumice, patients cannot see the disclosed plaque.

Summary

An isolated study provided evidence that more plaque can be removed by patients in the group situation when they are instructed in and carry out dental flossing and brush their teeth with water only, using the modified Bass technique, than can be removed by a similar group who receive instruction in and carry out the self-preparation exercise currently recommended by CFDS.

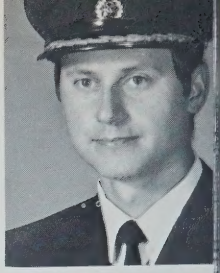
If the main purpose of the self-preparation exercise is to remove plaque then this study suggests that the modified Bass technique of brushing and dental floss does it better, by 136 percent. At the same time patients are taught approved methods of home care.

Although a change in the authorized procedure of preparing CF personnel for the application of topical fluoride is not warranted by the results of such a limited study, it is felt that further evaluation of the technique is justified.

References

1. CFDS Manual of Preventive Dentistry, 5th Ed., May 1972, para 201.
2. Ibid, para 205.

Panoramic Radiography: A Further Assessment



Major W. Budzinski, DMD*
Lieutenant-Colonel J.V.P. Chatwin,**
CD, DDS, DDPH, FICD

The orthopantomograph is an x-ray machine in which a narrow beam is revolved around the patient's head along a predetermined course while the film, mechanically linked to the x-ray tube, revolves on the opposite side of the object. The resulting film displays the entire dental bearing area at right angles. The value of this machine as a screening device has been reported by Lieutenant-Colonel Donely in his report of findings among 950 service members at the recruit base in Cornwallis.[1]

This department has such a machine and although it is used primarily to discover unsuspected pathology, it is also proving of value in the diagnostic field. The following case studies not only demonstrate its value in this regard, but also point up the necessity for prompt surgical intervention when pathology is detected. Additionally, it is demonstrated that although x-rays in only one plane are sufficient for operative dentistry, if there is any suggestion that a radiopaque shadow lies outside the mandible, or if a masking effect might exist, then other views must be obtained.

Case Report Number One

A 21 year old male serviceman was referred in June 1971 for an orthopantomogram with a complaint of pain and swelling of the left side of his face. The x-ray revealed a large oval-shaped cyst over the apices of maxillary left second bicuspid, first and second molars. The antrum appeared to be involved *(Fig 1)*.

Clinically there was an osseous swelling of the buccal tissues opposite the apices, and a soft tissue depression of the palatal mucosa intimate to these teeth. There was also a small fistula on the buccal aspect between the second bicuspid and first molar from which a purulent exudate could be expressed. The teeth were sensitive to percussion and were mobile.

The patient's record included a Panorex x-ray taken at the time of his enrolment in June of 1970 at which time the cyst was visible and noted. At that time it was only about half its present size *(Fig 2)*.

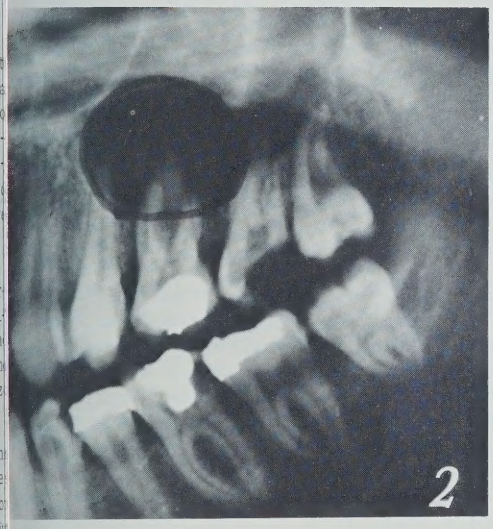
Under general anaesthetic the second bicuspid and all three molars were removed and the cyst was enucleated in toto. The cyst did not involve the antrum as previously suspected but, rather, the floor of the antrum was displaced upward. The cystic cavity was packed with iodoform gauze, the tissues repositioned and the flap closed with silk sutures. Healing was uneventful.

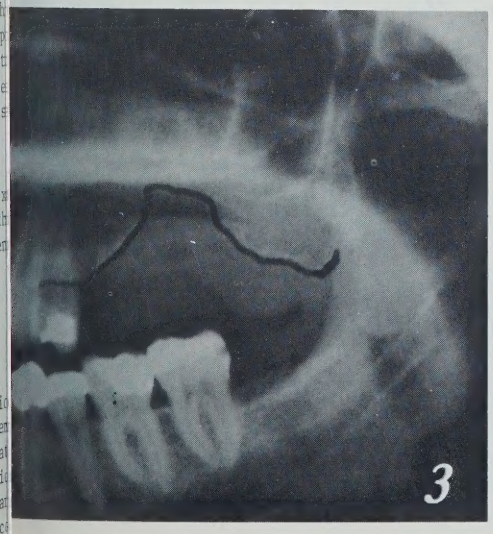
A 20-month post-operative panoramic x-ray was taken which revealed a healthy well-resolved operative site with extensive bone-loss *(Fig 3)*.

Discussion

The requirement for prompt correction of pathological conditions has been demonstrated. Procrastination by the patient was experienced in this case, which illustrates that careful counselling and follow-up is necessary in such instances.

*Senior Dental Officer, National Defence Medical Centre Dental Clinic
**Chief, Dental Department, National Defence Medical Centre.





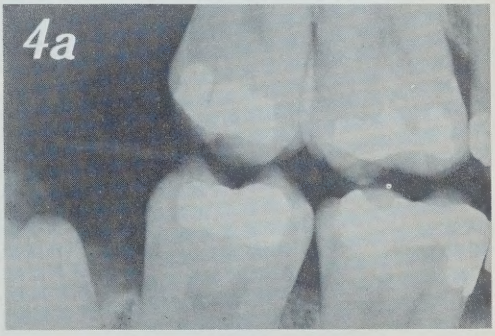
Case Report Number Two

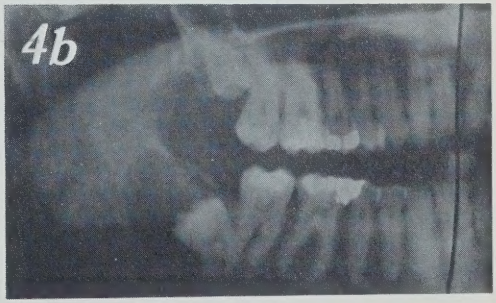
A radiograph taken as part of the routine examination of a 33 year old officer revealed the presence of impacted molars. The patient was queried concerning them. He had no compiaint and his dentition was in good order. Previous examinations had included routine bitewing coverage. *Fig 4a* illustrates one taken six years previously which shows a pathological area developing about an impacted lower molar.

A panoramic radiograph*(Fig 4b)* revealed a large dentigerous cyst which was later enucleated under general anaesthetic.Although the cyst had eroded several centimeters of bone covering the mandibular canal, no paraesthesia developed. Three impacted molars were also removed during the operation.

Discussion

There was radiographic evidence of developing trouble years previously but a severe gagging reflex had apparently precluded an intraoral radiographic examination in sufficient detail to demonstrate the complete lesion. Panoramic radiography is a significant aid in identifying the presence of molars which, if left in place, may lead to bone loss and pathological fracture.





Case Report Number Three

The patient, a 20 year old serviceman, was unconscious when admitted to a civilian hospital. He remained so for several days and when he regained consciousness he suffered marked disorientation and amnesia. Although he still had loss of memory 24 days later, he was considered to be physically well enough for discharge.

One month later he was admitted to the National Defence Medical Centre on referral for a neurological assessment of persistent amnesia and dizziness.

The preliminary findings were essentially negative and he was referred to psychiatry for further evaluation. The report indicated he was suffering from the after-effects of a fairly severe brain concussion.

The interview on which this report is based was of particular interest because the patient's wife, a registered nursing assistant,had mentioned that his teeth did not now mesh properly. She wondered if he had a dislocated jaw which might account for his vertigo.

Clinical examination presented classical evidence of a unilateral condylar fracture. The diagnosis was confirmed with a panoramic film *(Fig 5)*. Functional occlusion could be obtained on the unaffected side, using minimal pressure, and without pain or discomfort to the patient. It was felt that the fracture had occurred before the accident and that the malocclusion on that side,which apparently developed suddenly, was du to a muscle spasm.

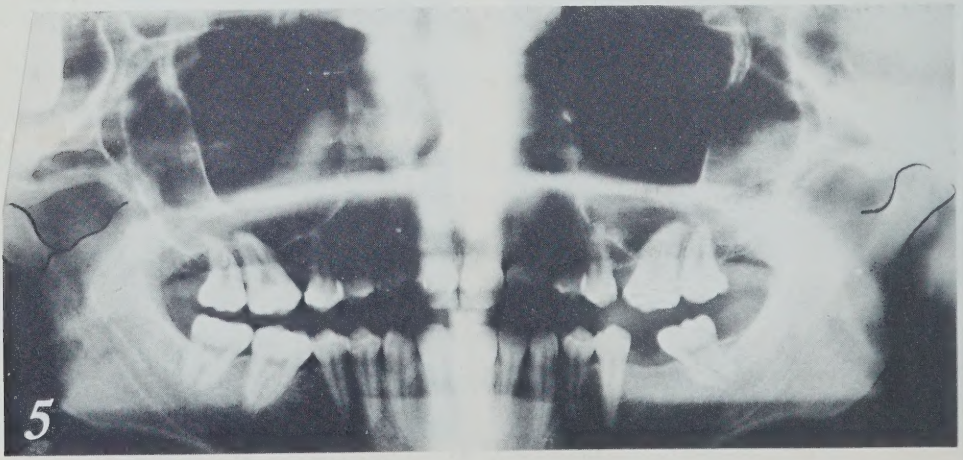
Accordingly,an eyelet wire was applie in the right bicuspid area and the mand ible immobilized for seven days.When th wire was removed, functional lateral ar occluding movements were observed ar good functional occlusion was maintaine over a period of eight months observa tion.

Discussion

It is of interest to conjecture whe the fracture occurred. Amnesia follow ing the accident precluded obtaining history from the patient which migh have confirmed a previous fracture c trauma which could have caused it. Th improved occlusion which followed treat ment tends to substantiate the spas theory. A panoramic film of this serv iceman's dentition on enrolment migh have clarified the situation and thi case demonstrates the value of the CFI policy which now requires such screeni on enrolment.

Case Report Number Four

The patient, a 41 year old servicema was seen on referral with regard to impacted third molar which had abscesse Extra-oral x-rays showed a radiopaci in the area of the lower border of th right mandible. A panoramic exposu verified the abnormality, which appear to be an impacted tooth *(Fig 6)*. T patient-history told of the sudden ons of pain in the right mandible two wee



5

eviously. Fever, swelling of the upper ck on that side,trismus and limitation tongue movement were also reported. s symptoms had increased in severity til an abscess ruptured spontaneously to the floor of the mouth.Subsequently felt slightly better. He had been on nV orally during the entire period but e response had been poor.

A Ludwig's abscess had been drained rgically in the early 1950's. The pat- nt had various allergies and was asth- tic but otherwise had been healthy ior to his most recent illness. Clin- al examination revealed that the right wer alveolar ridge was normal to palp- ion, both lingually and buccaly, and e patient's teeth in this area were t tender to percussion.

He was referred to E.N. & T. and their port indicated "...an abscess associa- d with calculus within the substance the right submaxillary gland..." This agnosis was confirmed by radiographic udies *(Figs 7, 8)* and through surgery.

scussion

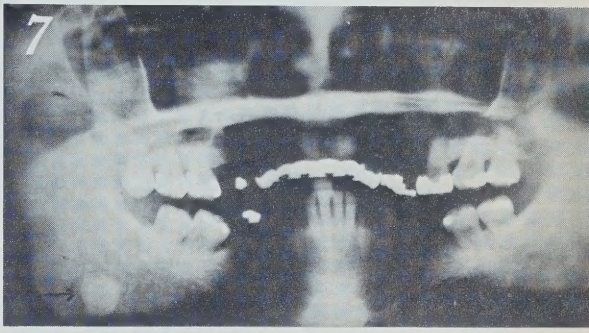
Treatment was delayed for several eks on the assumption,based largely on one-plane radiograph, that the condi- on was dental in origin. Although a ngle film frequently provides suffi- ent information, the exact location of radiopaque shadow requires exposures more than one plane. When additional lms were taken they demonstrated that e radiopaque shadow lay within the ght submaxillary gland and was not thin the mandible.

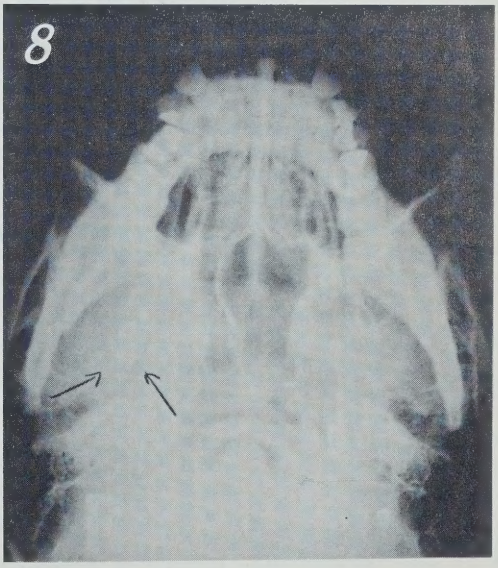
Summary

The orthopantomograph has considerable value in the screening field but it must be used with a degree of diagnostic caution. The interpretation of shadows, the possibility of masking, and the concurrent danger of relying on a one-plane view must be recognized. Pathological findings should be fully investigated and the potential hazards associated with procrastination must be presented to the patient. It should also be recorded on the serviceman's Dental Record that such information has been presented to him.

Reference

1. Donely, J.M. *A Panoramic Radiographic Study of 997 Canadian Armed Forces Recruits*, CFDS Quarterly, Vol 11, No. 4, Jan 1971, p. 2.





Reimplantation of a Posterior Tooth in an Adolescent

Captain J.C. Steel, BSc, DDS

Many instances of anterior teeth reimplantation after luxation are recorded in the literature.This article describes the reimplantation of a molar following extraction and endodontic therapy.

A 14 year old male Service dependant presented himself at the Masset clinic on 23 January 1973 complaining of an ache involving the mandibular right first molar.

Examination revealed a healthy, well-developed young man with a good dentition. Very few restorations were present and his oral hygiene was excellent. The tooth was not sensitive to percussion and the patient stated the ache was associated with mastication.A periapical radiograph *(Fig 1)* suggested carious exposure of the mesial pulp horn.

Under mandibular block anaesthesia the gross caries was removed and Dycal used as an indirect pulp capping. No attempt was made to remove the part of the lesion nearest the pulp horn for fear of an exposure. The preparation was sealed with a temporary dressing. The patient and his parents were advised that the pulp might be irreversibly damaged.

On 14 March he reported to the clinic again, complaining of a steady, severe ache of two days duration. The tooth was sensitive to percussion. For economic reasons, the parents declined endodontic therapy, and extraction appeared to be the only recourse.

Because of the patient's excellent oral condition, it was decided (with parental consent) to proceed in the following manner: the tooth would be extracted, endodontic therapy performed extraorally, and an attempt made to reimplant the tooth.

A mandibular block was administered with xylocaine hydrochloride 2% (1:100, 00). The tooth was extracted without difficulty and immediately placed in normal saline.

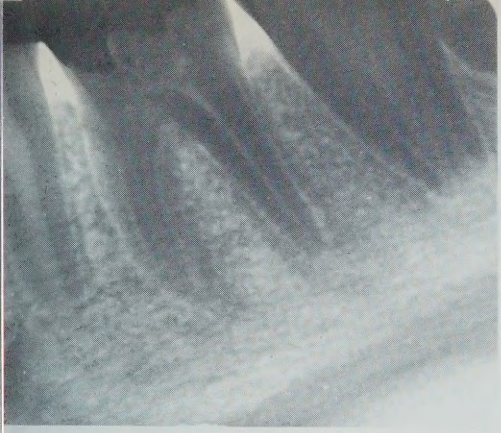
The interseptal bone was left intact. A folded 2"x2" gauze was placed over the socket, and the patient instructed to keep firm biting pressure on the gauze. He was then escorted to an adjacent room.

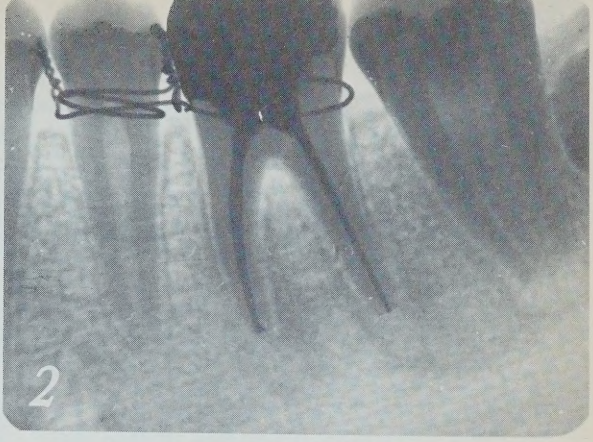
Holding the extracted tooth in surgical gauze saturated with normal saline and using a high-speed handpiece, the pulp chamber was exposed. Access to the canals was gained with a small barbed broach and the two mesial canals were found to be putrescent. All the canals were enlarged and shaped to a size #25 file and irrigated, under pressure, with sodium hypochlorite solution. Silver points and root canal sealer were used to obliterate the dried canals.To ensure an air-tight seal,the silver points were forced through the root apices and lateral condensation was used with supplementary gutta percha points. A mesioclusal amalgam was placed and the silver points trimmed off flush with the root tips.

The patient was recalled, and without scraping the periodontal fibers from the roots, the tooth was repositioned in the socket. It was observed at this time that the tooth was stable. Thirty-two gauge stainless steel ligatures were used in a figure eight loop to splint the tooth to the adjacent second bicuspid. The contact points were checked, and occlusal contact on the amalgam was relieved. A periapical radiograph was taken *(Fig 2)*. Penicillin V 300 mg. was prescribed for seven days and the patient dismissed. The total time expended was forty-five minutes.

When the patient returned the next day the tooth was quite stable and he had no complaints.

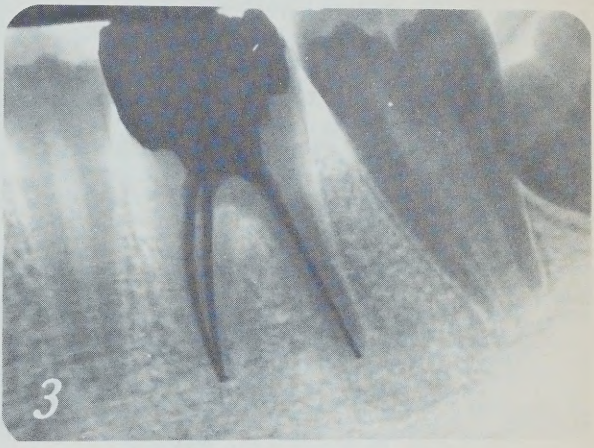
On the tenth post-operative day, the ligature wire was removed. The patient





ated the tooth felt comfortable even ring mastication. The periodontium ap- ared healthy and the gingival sulcus s not probed at this time.

In the third post-operative month, the tient had no complaints and could mas- cate without problem. Clinically, the oth and periodontium appeared healthy. obing revealed that the epithelial at- chment was at a normal level. Lateral d vertical percussion produced a sharp ng, compared with the cushioned res- nse of adjacent teeth, suggestive of kylosis. This diagnosis is supported radiographic evidence *(Fig 3)*, in that e continuity of the periodontal mem- ane and lamina dura is not clearly de- ned. The interseptal bone appears nor- l.



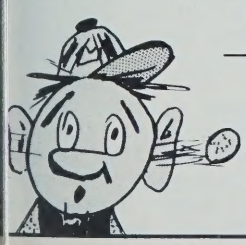
Although it is not suggested that this proach is universally applicable, the tegrity of the arch was maintained in is case without the use of an artifi- al appliance.

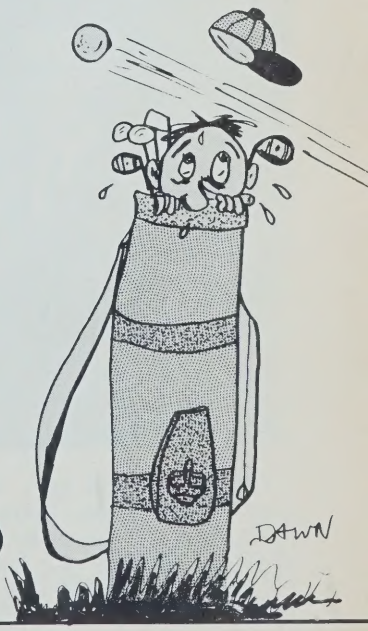
11th

CFDS GOLF TOURNAMENT

CFB TRENTON

Thur Fri
27 ~ 28 SEP





CANADIAN FORCES DENTAL SERVICES NEWS

CLINICAL AUXILIARY ACCREDITATION

The Canadian Dental Association Council on Education recently conducted evaluation surveys of the dental assistant (D Clin A) and dental hygiene (D Ther 6B) programs offered by the Canadian Forces Dental Services School. Both programs were awarded the accreditation status of APPROVAL.

The survey team and the Council on Education commented on the excellence of the programs offered by the School and congratulations were extended to the CFDS by the Canadian Dental Association.

BACK TO THE OLD EDITORIAL BOARD

LCol DH Hillier replaces LCol LA Richardson on the Editorial Board of the Quarterly effective this issue. This is his second time around, having been on the Editorial Board in the "early days" of the Quarterly - from April 1962 to July 1964.

DENTAL SVCS SCHOOL

by Sergeant R.K. Delmage

VISITS

Col Henry J Weisner, Chief of the US Army Dental Corps, Dental Science Division, Fort Sam Houston, Texas, was a guest of CFDSS 12-15 June. In his capacity of liaison officer to the Canadian Forces Dental Services School for the US Army Academy of Health Sciences, Col Weisner spent two days observing first and third phases of DOTP training and familiarizing himself with the Canadian Forces training system and the Dental Trades Structure.

LCol F Bourke, Royal Australian Army Medical Corps, visited the School on a familiarization tour of training and treatment facilities 7 May.

TEMPORARY DUTY

Col LG Craigie attended the Commandant's Conference at TCHQ Winnipeg 11-13 Apr; with Capts KR Morley and MFA Pilo he attended the Ontario Dental Association Convention in Toronto 14-16 May; and with Mrs Craigie, he attended the 1 Dental Unit Conference in Halifax 6-8 June.

BACK FROM CYPRUS

Capt Paul Williams returned from his sojourn with 2PPCLI in Cyprus none the worse for wear and with many a story to tell.

ORDER OF MILITARY MERIT

In a letter dated 13 June from Goverr ment House, CWO Mike McDonald was advis of his appointment as Member of the Ord of Military Merit. He will be presente

vith the Order at an Investiture this fall.

SUMMER EMPLOYMENT

Capts Keith Morley and Paul Williams, nd Sgt Keith Delmage have been loaned o the Officer Candidate School, Borden letachment, for employment in Phase I fficer training. They report that "fun n the sun" is the order of the day ... etween 1200 and 1300, that is. Capt illiams' field experience in Cyprus hould prove valuable.

UN GOLF DAY

As the mist rose from the Circle Pine olf Course on the morning of 24 May, uffers from CFDSS could be seen slicing nd slashing their ways around the greens n attempts to attain the coveted dist- nction of No 1 Duffer (CFDSS). Capt ave Hodges rose from the melee amidst ivots, dust and discontent to capture he limelight. The winner celebrated is victory and the losers comforted hemselves in a wined-up steak barbeque. y evening's end, it wasn't easy to sort ut the victor from the vanquished.

NNUAL SPRING BALL

Once again the month of May found the adies and gentlemen of CFDSS donning heir finery and gathering for the annual pring ball. This year it included be- ore-dinner cocktails, a sit-down dinner nd an evening of drinking, dancing and ocializing. Col Craigie welcomed the chool's recent arrivals, and gave a earty send-off to those leaving for new orizons. There was a note of sadness ith the farewell of MWOs Bob Goodwin nd Earle Mazerall, now retiring from he CFDS. Sgt Daryl Mason and Cpls Irv insor and George Payette did a first lass job as members of the spring ball ommittee, and earned a well-deserved ote of appreciation from all ranks.

OMMANDANT'S FAREWELL

When the School had been officially nformed that Col Craigie was being post- d to NDHQ as DGDS, the unit officers, arrant officers and sergeants decided o host him at two separate mess func- ions. Col Craigie was guest of honour t an Officers' Mess informal dining-in eld 25 May. LCol Reynolds, speaking on ehalf of the assembled officers, thank- ed the Commandant for his untiring lab- ours of the past five years. Col Craigie was presented with a set of six handsome silver wine glasses.

Next, a farewell luncheon honoured Col Craigie on 20 June in the Warrant Offic- ers and Sergeants Mess. An engraved sil- ver tray was given to him on his occas- ion. CWO Jack Sadler, on behalf of the dental hygienists and therapists at the CFDSS, expressed thanks for Col Craigie's efforts in obtaining accreditation of the clinical trades by presenting him with a matched set of luggage. Col Craigie leaves Borden on 27 August.

11 DENTAL UNIT

by Sergeant R.W. Boyd

TURNOVER

HQ 11 Dental Unit has now completed its turnover in staff with the arrival of Capt WA Jackson, former therapist offic- er from Cornwallis, who is now our AdmO, and Sgt Bill Boyd, who arrived in May to fill Sgt Dick Walker's shoes. Dick has been posted to Lahr; this will be his first posting outside the CFDS.

2ND PHASE SUMMER TRAINING

2Lt PM Lobb was the only officer to undergo summer training at the clinic in Esquimalt. He is the eldest son of Capt EM Lobb, the quartermaster of 14 Dental Unit, Edmonton. This is the first father and son combination to serve in the CFDS at the same time.

TO FISH OR NOT TO FISH

The weather looked promising, overcast but no wind; a fine day for fishing. 2Lt Pete Lobb caught the largest fish - a 25lb spring salmon. He was fishing with the area's resident salmon guide, Capt Doug Watson, who reported that Pete lost a much larger fish due to salmon fever (something like buck fever). There were quite a few fish caught: Dave Angus two 11-1b springs; Doug Watson, a 10-1b spring; Phil Coss, a 3 pounder; and Capt Bill Jackson's boat caught two, the

lack of poundage indicating they were not of a size to brag about.

THE SWINGING SCENE

Thirty golfers and ten spectators went to Nanaimo on 31 May to participate in the 11 Dental Unit Golf Tournament. Gerry Anderson captured Low Gross and 2Lt Pete Lobb won Low Net. The tournament ended with a roast beef dinner at which LCol Taylor presented the prizes.

ROAD RUNNERS

In April's edition of the Quarterly we made note that 15 members of the Naden clinic had set out on a 3,500 mile run from Halifax to Victoria on 8 January led by team captain Cpl Arnie Alkenbrack. Total team mileage is still being counted until 30 June, with Arnie going around with pen, book and tabulation sheet to record the effort. Our dental team finished fourth of eleven teams at noon on 15 May.

Individual mileages, with Sgt Earle Borden leading the way at 660 miles, are: LCol WH Harrington 99, Capt BD Kendell 283, MCpl Creelman 55, Capt Fennell 143, Mrs B Dennis 158, Sgt DT Murley 355, Miss Bonnie Greening 253.5, Mrs E Hancock 90.5, LCol AG Taylor 84, Cpl Alkenbrack 261, Cpl P Maelde 435.5, Cpl PR Coss 127, Cpl H MacGillivary 145.5, Miss MG Liddle 353.5

12 DENTAL UNIT

by Lieutenant D.E. Fraser

FIRST ANNUAL UNIT CONFERENCE

A successful all ranks unit conference was held at CFB Shearwater 7-8 June. 28 unit officers and 61 men and civilians attended. Guests included Col LG Craigie, Capt RD Carver, Capt R Savoie and MWO Adams.

After an introduction by the CO, talks were given by the supply officer, PCO/Dent and PCM/Dent. Guest speakers from Dalhousie University were: Dr FW Lovely, Dr OP Sykora and Dr DV Chaytor.

Social events included a welcoming stag and a wind-up buffet and dance.

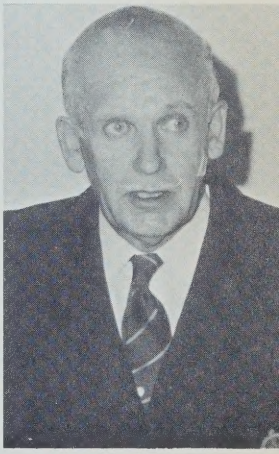
Next year's conference is planned to be held at CFB Gagetown on the theme: *Military Obligations of CFDS Personnel.*

"No sir, I don't think this is a piece of dental equipment."

"After due deliberation, we're all agreed this isn't a piece of dental equipment."

WO Ray Veinot demonstrating the use of he cavitron to MWO Therrien, Miss Coller and WO MacLean during one of the onference's training periods for dental herapists.

RETIREMENT



Signalman Cobb TD joined the Royal Canadian Corps of Signals (Non-Permanent Active Militia) in May 1937. In September 1939 he went overseas with 3 Division Signals, returned to Canada in May 1942 for officer training at Brockville and returned to Europe as an officer. He took his release in 1945 but joined the RCDC as a dental officer in 1951 and served at sea, in Europe and various Canadian Forces Bases until 1964 when he became BDentO at CFB Gagetown.

On 25 May the dental staff at Gagetown held an all ranks dinner to honour LCol and Mrs Cobb. They were again honoured on 8 June during the closing party of 12

Dental Unit's first annual conference. Col LG Craigie presented LCol Cobb with the CFDS Crest and BGen (Retired) BP Kearney presented a gift on behalf of unit members. The Cobbs have moved to Tea Hill, close to Charlottetown, PEI, where LCol Cobb has the foundation laid and construction started on the "Cobb Web", where, we presume, all dental flies-by-night will be welcome.

Painting by MCpl Buchanan, 12 Unit dental assistant, after presentation on behalf of of Gagetown clinic staff to LCol and Mrs Cobb.

Col Protheroe (right) relating a story concerning the sketch of HMCS Quebec, a ship LCol Cobb served on. Maj Petrie (centre) was master of ceremonies. Sgt Harold Roberts, who served with LCol Cobb on the Quebec, had the sketch prepared for presentation on behalf of 12 Dental Unit personnel.

PEOPLE IN THE NEWS

Maj Gunther recently participated in teaching laboratory procedures to civilian dental assistants in Halifax under the auspices of the Nova Scotia Dental Association ... WO LG Peverill, a native Haligonian in the CFDS since 1962, and now a therapist at the Shearwater clinic was named Man of the Week in the 6th

une issue of the Dartmouth Free Press .. Dr Maury Massler, Associate Dean of llinois College of Dentistry conducted continuing education course at Dalousie University 14-16 May. Majs NH ndrews, RE Dyer, AL Kelland, HK Meisner nd GD Petrie attended ... Mrs Sandra eath was recently installed as President f the Nova Scotia Dental Nurses and ssistants Association. Sandra is a HS3 at the CF Hospital clinic at Stadaona ... Maj and Mrs Gunther and their our children: Danny, Jeffry, Susan and tephen, were depicted as the Family of he Week in the 7th July issue of the alifax Mail-Star.

SPORTS

Maj Brown of CFB Cornwallis clinic enjoyed a round of golf with BGen Lett of Training Command during the CFRS 5th birthday celebrations.

On 4 July the Halifax-Dartmouth members of the unit gathered in the fog at Hartlen Point Golf Club to play their annual round of golf. Again this year Capt (retired) Jack Mullins won the tournament. MCpl Buck Buchanan organized the event. He reported that the fog was thicker at the 19th hole than at any of the other 18.

To show appreciation for a job well done, LCdr Jim Sine and some of the ship's company hosted the dental staff of the Dockyard dental clinic for lunch and a tour of HMCS Huron. LCdr Sine is on the extreme left above.

On 12 April, the Deputy-Supreme Allied mmander Atlantic, Vice-Admiral Manseld, RN, toured HMCS Protecteur at a off Newport, Rhode Island. His visit the dental van staffed by Capt Dave ore and Sgt Ken McDonald was one of ny and he expressed his pleasure at eing dental care provided by Canadians r the Standing Naval Force Atlantic. so in the photo are Commodore R Weevs, Netherlands Navy, and Capt DN Mainy of Protecteur.

13 DENTAL UNIT

by Lieutenant R.W. Shore

FAREWELLS

Members of HQ 13 Dental Unit and Trenton dental clinic bid farewell to LCol and Mrs WW Anglin on 8 June. LCol Anglin now on terminal leave, retires in August to local private practice. His career spans thirty years of service during which he has served in such exotic spots as Korea, Goose Bay, Borden and Petawawa.

At this same function, farewells were said to Sgt and Mrs WD Buxton. Sgt Buxton is retiring in July after twelve years in the CFDS, to operate a dental laboratory in Fredericton NB.

LCol Anglin presents a retirement gift to Sgt Buxton.

MCpl RC North, Moosonee detachment, and Capt PA Wood, Kingston detachment, both returned to civilian endeavours in April.

LCol Anglin being presented with the CFDS Crest by Col WR Thompson on behalf of the officers of the CFDS.

MWO VR Kidd presents the order of St Apollonia to LCol Anglin, the first dental officer to be made a member of the Order.

SPORTS HOT SEAT

The CFB Petawawa detachment was tasked with organizing, operating and umpiring curling activities for Sports Week 73, 2-6 April. Capt GE Rocque participated in hockey, Cpl RA Powell in skiing, Cpl L Petkow-Awramow in shooting, and various other members in curling.

Congratulations to the valiant North Bay detachment volleyball team who finished second in their division...True sportsmen, one and all.

CFB Trenton Golf Club was the site of an "officers versus other ranks" golf tournament in May. The other ranks were easy winners. Rumour has it that Maj DG Jones threw the match. The winners: MWO RF Matheson, MWO JE Raymond, MWO VR Kidd, Sgt NL Highfield, Sgt WD Buxton, Cpl RW Mullin. (Sgt JR Curtis is missing.)

NADIAN FORCES DECORATION

(Above) Trenton Detachment. MCpl WH *rwick receives CD from Maj DG Jones.*

(Upper Right) Kingston Detachment. WO *Lensey receives First Clasp to CD* *om Maj IAC MacDonald.*

(Lower Right) North Bay Detachment. *Cpl GE Sykes presented CD by Maj H* *iesbach.*

14 DENTAL UNIT

by Mrs M Dykes

PRAIRIE PATTER

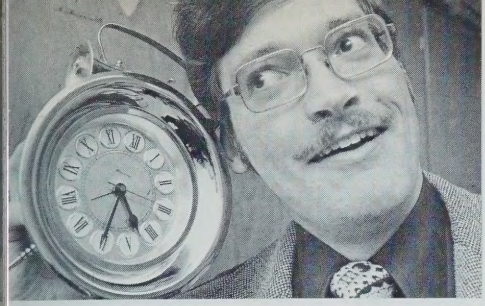
Col Pierce and Maj Headley recently visited CFS Alsask to make final arrangements for the detachment's reversion to part-time status ... The dental clinic at Calgary was visited by Dr Valentini and four dental hygienists from Mountview Health Unit to observe a brush-in and see the CFDS preventive dentistry film ... Women's Lib has invaded the CFB Moose Jaw clinic in the form of a female cleaning lady. The clinic cleanliness has improved, but we don't think this is what the Lib Leaders had in mind ... The CFB Cold Lake dental personnel were forcefully reminded that safety hazards exist in the most unusual circumstances when a large rock was thrown through a clinic window by a power lawnmower ... The Calgary clinic staff said goodbye to Mrs Phillips, going to Victoria after many years in the Calgary clinic ...Capt PP Psaili received a Community Service Award from CFB Portage la Prairie for his dedicated work in support of the local Cub and Scout groups ... An emergency call from the Red Cross for blood was answered by MWO EK Abernethy and Pte DM Brasseur ... Capt GG Milne has qualified for a private pilot's licence and Capt GA "Red Baron" Boulanger has qualified for a commercial pilot's licence - both are up in the air about it ... No tall fish tales have been received - it is hard to believe that the members of this unit have run out of lies ...

GREENER PASTURES

A retirement party was held 18 May in the Minto Armouries, Winnipeg, to honou Mrs Kay Coombe, civilian dental nurse, following 18 years as an active member of the Militia. Sgt Coombe joined 57 Dental Unit (M) in 1955 and when the unit disbanded in 1965, she transferred to the Royal Winnipeg Rifles. Although she appreciated the silver mug presente to her, Kay stated that the dental trai ing received and the many friendships made, were her real rewards.

In April the dental staff at CFB Winnipeg bid adieu to Capts Brian Vandervaart and Doug Pettigrew. Capt Vandervaart is now an Medical Associate Offic er at CFMSS, Borden. Capt Pettigrew ha begun private practice in Winnipeg and plans to take post graduate training in periodontics in Toronto.

Maj IW Susser presents a clock to Cap Pettigrew as Col Pierce, Capt Vandervaa and Col LG Craigie look on.



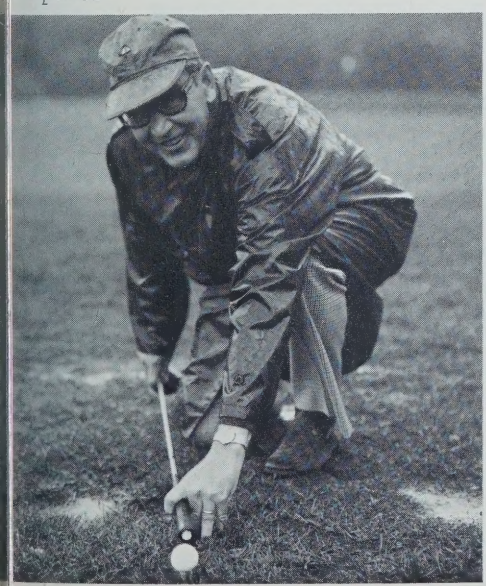
ORTS

Maj RCA Fearon was a member of the Al-sk team in the annual Prairie Region ad Race. The team placed first, re-turing the trophy from the PPCLI. Maj aron should fit in well at the CFDS hool?

Monsoons plagued the Cold Lake area on June as the detachment hosted its 3rd nual Golf Tournament open to all dent- personnel in Alberta. Despite the ins, members of the CFB Calgary and monton detachments arrived to compete th the local pros for the coveted phies and prizes. They proved to be competition however, as Cpl GR La-ntagne turned in the low gross score d captured the Shand-Jackson Trophy. pt Gaetan Boulanger won the Medley ailer Sales Trophy for low net score.

One of the most sought after trophies, e Col LR Pierce Duffers Award, was in rong contention this year and after 9

e Opener



hacking holes was captured by Cpl RF Ab-falter of CFB Edmonton.

Other winners:

2nd low gross:	Capt DR Wright
2nd low net:	CWO MJ Tapp
3rd low gross:	Sgt DL Kerr
3rd low net:	Sgt PJ Mehler.

Everyone gathered in the evening to en-joy fine music, delicious food and extra dry drinks.

Mr Gerald Shand, formerly with the CFB Cold Lake detachment, presents the Shand-Jackson Trophy to Cpl Lamontagne.

LCol JJN Wright presents the Medley Trailer Sales Trophy to Capt Boulanger.

LCol HR Kettyls presents 2nd Clasps to Capt EM Lobb and CWO HC Bilbey.

15 DENTAL UNIT

by Lieutenant J.M.S.O. Gélinas

IN and OUT

Maj JA Boucher to St Jean from 35 Field Dental Unit ... Lt JMAO Gélinas from CFB Montreal ... Capt JJMP Beauchemin from University of Montreal ... Lt VL Kwasnik to CFB Cornwallis ... WO GN Fathers to CFDSS ... Capt Paquin to Cyprus.

SPORTS

LCol Begin, Maj Arpin and Maj Jacques spent the St Jean Baptiste weekend at Lac Itouk, 35 miles north of Bagotville The lake is known as a fisherman's drea and apparently the dream came true sinc they claimed a catch of 280, not counting the small ones thrown back in ... Volunteers mustered on the back lawn of LCol Begin's residence to erect a 10x15 foot above-ground swimming pool. Capt Roy, Lt Langlois, Sgt Innis, Cpl Beaulieu and Cpl Brisebois got steaks,liqui refreshments and, of course, a dip in the swimming pool for their efforts.

CFB BAGOTVILLE CLINIC STAFF. *(Left to right) Front row: WO DeBlois, Maj Jacques, Capt Meunier. Back row: MCpl Frechette, Pte Genest, Sgt Cormie.*

REVENTIVE DENTISTRY

WO DeBlois and MCpl Frechette set up booth and showed a film on preventive entistry for the benefit of Bagotville nd Saguenay Valley natives on Armed orces Day ... Capt Chestnut recently isited a Grade 3 class. As a token of ppreciation, the teacher asked the hildren to write him a short note of hanks. One little girl, referring to he large models used for demonstrating both brush techniques, wrote: "I loved he big teeth; they would fit my bro-her's mouth perfectly."

NIVERSITY TRAINING PLAN (MEN)

Sgt Hans Gapmann has been selected for TP(M) and will attend Royal Roads Mili-ary College for the next four years. ans has been in the CFDS eight years as laboratory technician.

CANADIAN FORCES DECORATION

WO Duvé presented with the CD by Col MacDougall. Lt Kwasnik looks on.

35 FIELD DENTAL UNIT

by Sergeant W.B. Looker

ISITS

MWO Colin Adams, DPCM, NDHQ, visited 5 FDU in March. Colin held much apprec-ated interviews and briefings at Baden, ahr and at SHAPE.

A special Service flight to Turkey gave ome members an opportunity for sight-eeing and buying: Maj and Mrs T Ring-and, WO and Mrs J Bleakney, Cpl and Mrs Overbye.

N THE FIELD WITH 35

"Munsingen-FTX" are familiar words to ervicemen in Europe. This year being o exception, the dental team again was well represented by Capt R Gish and Cpl L Overbye, Maj T Ringland and MCpl T James. Cpl Lorne Overbye, a Lab man, filled the role of a Dent A. Lorne came through with flying colours and now wonders if he missed his calling.

It was off to the ranges again for 35 FDU. All marksmen they are not, however. All qualified on the basic weapon FN C1 and C2, and some not so basic - SMG, pistol, M72 and 84mm.

PERSONNEL

MCpl Marg Daniels is on sick leave after a stay in the local hospital ... Postings this summer: Maj Boucher to St Jean, WO Deloughery to Borden, WO Fret to Kingston, Sgt Looker to Chilliwack, Sgt Wormington to Ottawa, MCpl Craig to Winnipeg. To release: Capt Schroeter (will be employed at Lahr with Dependant Dental Service),Capt Morrow to post-graduate training at Univ of Manitoba.

1 DENTAL EQUIPMENT DEPOT

by Lieutenant J.J.L. Lamontagne, CD

ISITS

Col WR Thompson and Lt JR Shore included a brief visit to 1 DED in June while touring 13 Dental Unit detachments ... CWO L Lawson and WO JF Kennedy visited the dental clinic at Trenton to verify inventory statements.

PERSONNEL

WO RW McDonald is posted to 14 Dental Unit detachment in Edmonton ... Sgt PJ Dumas has returned from para training -

he's decided not to take the jump ... MCpl CC Shave was on special leave in July to assist with the organization and operation of the Cub Camp. (No, Chester, this does not count as field training).

SPORTS

The 1 DED annual "ice" fishing derby was held on 5 May. The only ice in evidence, however, was stored in coolers to keep the refreshments cold. The event was staged at WO Haig Park's cottage on beautiful Golden Lake where everyone enjoyed barbecued steaks, hot dogs, hamburgers, and a delicious salad prepared by Mrs Marie Everett. Even the mosquitoes and black flies were well fed. Despite beautiful surroundings, excellent weather, delicious food and enthusiastic fishermen, the scene at the weigh-in reflects the results:

WO George Wadden - first prize for releasing a four-pound bass; Clarence Boldt - second prize for snagging a clam; other prizes went to MWO Ernie Everett, WO Joe MacPhee, Cpl Willy Wilson, Cpl Ray Duffield and Lt John Lamontagne for their efforts.

All evidence, including photos, was destroyed to protect the innocent.

CANADIAN FORCES DECORATION

Cpl RG Duffield of the Repair Section is presented with the CD by Maj MB Fisk.

DENTAL SVCS NDHQ

CONVENTIONS

BGen Garth C Evans and Col GR Covey attended the annual Ontario Dental Association Convention held in Toronto in May. BGen Evans has just returned from "down under" where he attended the annual FDI meeting. This year the meeting was held in 70° midwinter (July) weather in Sydney.

LEAVE

Maj Ray Peebles reached the west coast and the blue Pacific on leave this past month while LCol Richardson trail(er)ed about Ontario.

BRICK AT BISLEY

Once again the CFDS sharpshooter, LCol JC Brick attended the annual Bisley shoot. In the past few years, LCol Brick has been selected on three occasions to represent the Canadian Rifle Team at Bisley. In 1972 he held the position of Commandant of the team. This July he again travelled to Bisley as a shooting member of the team and, during two weeks of rain and temperatures of under 60°, participated in the matches. Teams to Bisley were from the United States, South America, England, Ireland, Scotland, Wales, the Jersey and Guernsey Islands and seven Commonwealth countries. The Canadian team entered seven major matches and won six. LCol Brick's personal effort resulted in perfect scores in six matches and he was awarded a silver and three bronze medals. We are pressing him for a future article to describe the matches more fully and tell us other duck hunters what we must do to be selected.

ARRIVALS/DEPARTURES

LCol DH Hillier arrived at the division in June from Cornwallis to replace LCol LA Richardson who is destined for CFDSS later in the summer ... LCol MN Deyette has been posted to the division as Director of Plans and Requirements ... Maj V Lanctis, after graduation from Staff College, has been posted to NDHQ as career manager filling the position vacated by LCol Deyette.

Russia with Amalgam

In response to a request from the Canian Forces Attaché and the Departnts of External Affairs and Trade & mmerce, LCol LA Richardson and WO HA ng made the initial visit to Moscow 20 May to provide dental services for e Canadian community. The three govnment departments shared the costs of e trip and expressed their satisfactn with the program. A small USAF inic in the American Embassy was made ailable for use by the team.

COLONEL TURNER RETIRES

A dinner was held in the Army Ottawa Officers' Mess on 14 June to honour Colonel Jay Turner on his retirement from the Canadian Forces. The function was attended by officers from the division and nearby dental units and by other friends of "The Turners". Col Turner's military career from 1944 was reviewed in some detail by BGen Evans. Messages from all units were read by Col Covey.

Sincere best wishes to the Turners. They plan on making Ottawa their home. Col Turner will engage in private dental practice.

▲*LCol Richardson presents Nell Turner a bouquet of red roses on behalf of the members of DGDS.*

◀*Col Turner holds an Eskimo carving presented to him by members of the division on his retirement.*

PROFESSIONAL TRAINING

LCol JJB Houde recently received a ploma in dental public health after a e-year course at the University of ronto. A 1950 graduate of the Univsity of Montreal, LCol Houde is now th 12 Dental Unit in Halifax. Prevus appointments were with 14 and 15 ntal Units.

Maj GHJ Pinsonneault has completed the quirements for qualification as an orthodontist. He has fulfilled the two-year postgraduate program at the University of Toronto. Maj Pinsonneault has been posted to CFB Cold Lake where his talents should be well received. Previously at CFDSS, he is a 1967 graduate of the University of Montreal.

Major VJ Lanctis has completed a one-year Canadian Forces Staff College course in Toronto. A 1966 graduate of the University of Montreal, he has held appointments with 11 Dental Unit, 35 Field Dental Unit and at SHAPE headquarters. He has now been posted to NDHQ as a career manager.

US NAVAL DENTAL SCHOOL, BETHESDA

Periodontics
Maj HJ Nadeau, 16-20 April

DARNALL ARMY HOSPITAL, FORT HOOD

General Dental Residency
Maj W Budzinski, July 1973-July 1975

IRELAND ARMY HOSPITAL, FORT KNOX

General Dental Residency
Maj JOL Bourget, July 1973-July 1975

UNIVERSITY OF BRITISH COLUMBIA

Panoramic Radiography, 31 May-9 June
MWO CM Torrens, WO JF Giroux, Mrs T Jewers

CDN FORCES TRAINING

CF DENTAL SERVICES SCHOOL

D Lab Tech PL6, 4 April-15 June
MCpl JN McKenzie, Cpl GG Bowser

CF STAFF COLLEGE

Junior Staff Officers
Capt RI Stammers, 30 April-6 July

CF SCHOOL OF INSTRUCTIONAL TECHNIQUE

Instructional Technique
MWO RE Todd, 15-27 June
Sgt LH Pion, 9-13 April

Audio-Visual Instruction
CWO WO Morris, 1-5 June

CF SCHOOL OF MANAGEMENT

Senior Officers Management Symposium,
LCol JVP Chatwin, LCol MN Deyette

Advanced Management
Maj JF Marcil, 14 May-1 June

Middle Management
Capt PP Psaila, 19 June-12 July

CF MEDICAL SERVICES SCHOOL

First Aid
WO JG McDonald, 25 May-8 June

CFB PORTAGE LA PRAIRIE

Junior Leadership
MCpl CH Forsythe, 7-11 May

PROMOTIONS

Colonel

DH Protheroe, 16 July
Col Protheroe is a 1950 DDS graduate of the University of Alberta. He also holds an MPH from the University of Michigan (1958). At present serving as Commanding Officer of 12 Dental Unit, he has previously served in Canada and Europe and has held appointments within DGDS and the CFDSS.

Lieutenant-Colonel

JJB Houde, IAC MacDonald, CL Gullekson, PR McQueen

Captain

CB Bullock, JA Casey, WJ Dawson, GD Huf JERJ Gauthier, KB Musselman, KW Howie, MW Garriott, RP Alberti, JJMP Beauchemi JWG Valois, RA Hodge

Master Warrant Officer

RE Todd

Sergeant

JM Arbour

Master Corporal

R Claveau, LJ Kallman, EF Barnes, MFF Audet, WC Spates, H George

Corporal

ML Forlippa, JB Bolduc, SV Hills, JJ Boulay

HONORS & AWARDS

CANADIAN FORCES DECORATION

LCol CL Gullekson, Sgt H McRae, MCpl Sykes, WO GN Fathers, Capt PR Wooding, N Cable, Cpl DH MacKay, WO HA King, Sg RW Danyluck, Sgt Scheer, MCpl WH Renwi Cpl RG Duffield, WO EA Duvé.

IRST CLASP TO CANADIAN FORCES DECORATION

MWO MM Fediuk, MWO EE McFadden, WO EJ ansey, MWO M Beauvais.

RDER TO MILITARY MERIT

Member: MWO CM Torrens, CWO M McDonald.

WELCOME BIENVENUE

A cordial welcome to the Canadian orces Dental Services is extended to: apts RP Alberti, RA Hodge, KW Howie, A Casey, CB Bullock, KD Musselman, WJ awson, GD Huff, MW Garriott, JWG Val- is, JERJ Gauthier, JJMP Beauchemin, Lt MSO Gélinas, Mrs Betty MacKay, Mrs J erjaeghe, Miss J Pelletier, Cpl CH oiwod, Mrs G McNair, Mrs Joan Johnson, gt MH McMurtry

FAREWELL AU REVOIR

The best of luck to: LCol TD Cobb, ol JW Turner, LCol WW Anglin, Capt JJ ampbell, Capt JGL Dessureault, Capt DE ibbs, Capt JP Meunier, Capt WEJ Nind, apt DW Pettigrew, Capt KEH Rosengart, Capt JF Stengl, Capt PFG Stirling, Capt HW Wilford, MCpl MJ Denis, Capt B Vandervaart (to CFMSS), MWO EE Mazerall, Capt JS Duchesne, Mrs DK Howson, Capt PE Arnold, Maj DE McDermott, Mrs PL Keyes, Sgt WD Buxton, Capt Schroeter, Capt Morrow, Mrs Marg Simonson, Mrs J Duchesneau, Mrs H Daly, Mrs M Hudson, Sgt W Wylie.

VITAL STATISTICS

MARRIAGES

Congratulations and many years of happiness to: Miss Sharon Clelland and Capt RL Thompson; Miss Barbel Hoesch and Maj H Griesbach; Pte(W) CA Rathbone and Cpl Lorne Hawkins.

BIRTHS

Sons: LCol and Mrs JF Begin, Capt and Mrs MM Kropinak

Daughters: Maj and Mrs JG Boucher.

CONDOLENCES

Deepest sympathy is extended to: Mrs Boneau on the loss of her husband; WO RM McDonald, WO Sprathoff and MCpl CH Forsythe on the loss of their fathers.

In Memoriam

We have learned with regret the sudden passing of Corporal Wally Mitrikas on 12 July 1973. He was a member of the laboratory staff at the CFDSS.

Corporal Mitrikas was interred with military honours in the Stevenson Township Cemetary, Utterson, Ontario.

Deepest sympathy is extended to his wife Joan and son Brian James.

CFB EDMONTON (GRIESBACH) DENTAL CLINIC

(Left to right) Front row: Cpl JJ Vasek, Mrs G Volk, CWO HC Bilbey, LCol HR Kettyls, Capt EM Lobb, Mrs D Pratt. Back row: Cpl RF Abfalter, Sgt JF Hill, WO HD Wagstaff, Sgt BF Hannah, Maj WR Collier.

he

CANADIAN FORCES DENTAL SERVICES Quarterly

LUME FOURTEEN · NUMBER THREE · OCTOBER 1973 ·

The CFDS Quarterly

·VOLUME 14 · NUMBER 3 · OCTOBER 1973·

Published by authority of Brigadier-General Garth C Evans, CD, QHDS, DDS, FICD, i April, July, October and January, The Quarterly serves as a means for the exchang of ideas, experiences and information within the Canadian Forces Dental Services Views and opinions expressed are those of the authors and not necessarily those c the Director General of Dental Services or the Department of National Defence.

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Cover Photo

Order of Military Merit to MWO Colleen Torrens. See 15 Dental Unit News. Photo by John Evans, Ottawa.

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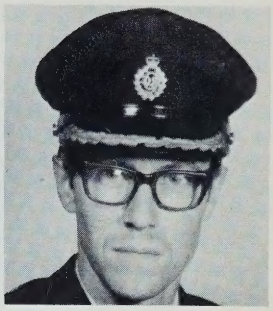
he Problem of the)istal Extension Partial Denture



Major E. D. Cragg, DDS.

TRODUCTION

A removable partial denture having one two extensions distal to the remain- natural teeth derives its support om both resilient and non-resilient issues. This dual support presents cer- in fundamental problems which differ atly from those encountered with a ally tooth-borne denture.

The primary problem presented by dual port is one of stress distribution. ring functional movements, definite ces come into play which must be con- lled in order to avoid injury to the atment teeth or the supporting edentu- us ridge. This article discusses how e design of the distal extension part- denture influences stress distribu- on.

SICAL FACTORS

McCracken[1] has stated that the absence non-resilient posterior support to e distal extension partial denture l cause the 'saddle' to move toward e tissue under function, proportionat- to the quality of the supporting sues and the accuracy of the support- base. Applegate[2] compares the dist- extension partial denture to a Class ever. Functional forces acting upon e distal extension are magnified in ect proportion to the lever length, e amount of occlusal force applied, and e degree of base movement which occurs.

The occlusal rest acts as a fulcrum, l those elements of the direct retain- which lie in an undercut area anter- to the fulcrum will transmit a tor- ng force to the abutment teeth. If one siders the biting force which can be lied during mastication, combined with e mechanical advantage of the Class I er having a long power arm and a short leverage arm anterior to the ful- crum, then the tremendous torquing for- ces acting upon the abutment tooth (Fig 1) when a cast circumferential clasp is utilized as a direct retainer is readily apparent.

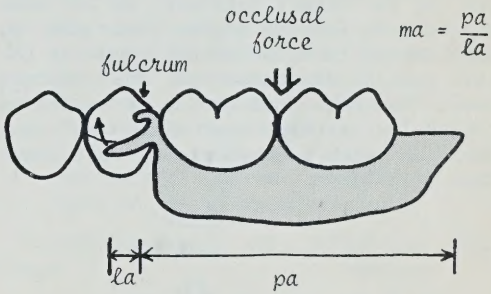


Fig 1. The mechanical advantage (ma) of a Class I lever is dependent upon the relative lengths of the power arm (pa) and the leverage arm (la).

The distal extension partial denture requires an entirely different design than does one in which total tooth sup- port is available in order to compensate for the rotational movement about the fulcrum during function, and the potent- ial torquing force which results.

THE DIRECT RETAINER

The direct retainer must be so design- ed that destructive forces will not act upon the abutment tooth. At the same time, it must fulfill its essential re- quirements of support, bracing and re- tention. Two conventional methods of clasping are available which will mini- mize torquing forces applied to the abutment tooth. The first involves the use of a retentive arm which is able to flex in all directions. A retentive clasp arm made of wrought wire or PGP (Plati-

num-Gold-Palladium) alloy can flex more readily in all directions than can a cast half-round clasp arm, and can more effectively dissipate those stresses which would otherwise be transmitted to the abutment tooth. A combination clasp employing a wrought wire or PGP alloy retentive arm provides such flexibility without loss of bracing. Because the reciprocal arm of the combination clasp is cast, and is therefore rigid, it is able to effectively resist lateral forces and also reciprocate the force exerted by the retentive arm as the denture is inserted or removed.

The second method of clasping involves the conversion from a Class I to a Class II lever situation in order to direct forces away from the abutment tooth. This is achieved by locating the retentive tip of the direct retainer on the same side of the fulcrum as the power arm so that during function it will move in the same general direction as the denture base. The method of choice is to use an infrabulge bar-type cast clasp in conjunction with a mesiocclusal rest position (Fig 2).

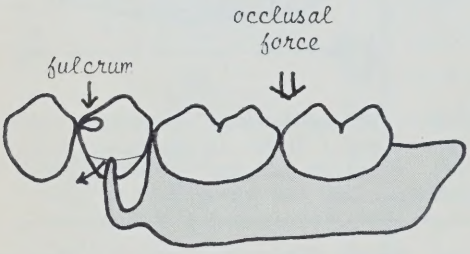


Fig 2. An example of a partial denture framework design acting as a Class II lever with the retentive tip located on the same side of the fulcrum as the power arm.

McCracken[3] warns against placing a bar-type clasp arm with a distocclusal rest on a terminal abutment if the undercut lies on the side of the tooth away from the extension base (Fig 3). The torquing effect would be the same as if a cast circumferential clasp had been used. He prefers a modified T-bar retainer engaging a distobuccal undercut, and used with a mesiocclusal rest position (Fig 4).

Other bar-type direct retainer assemblies which McCracken recommends for use with a distal extension partial denture

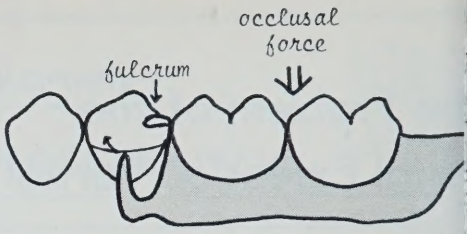


Fig 3. Rotation about the distocclusal rest causes the retentive tip of the infrabulge bar clasp to move forward and upward, engaging an undercut and torquing the abutment tooth. The partial denture is functioning as a Class I lever.

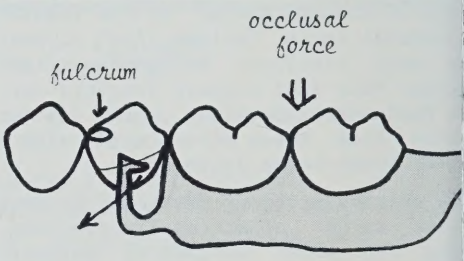


Fig 4. A modified T-bar clasp employing a mesiocclusal rest position and engaging a distobuccal undercut. The partial denture is functioning as a Class II lever.

are:

- a modified T-bar employing a dist
cclusal rest position and engagi
a distobuccal retentive area(Fig
or
- an I-bar used in conjunction with
mesiocclusal rest position
placed in an undercut at the grea
est convexity of the buccal surfa
(Fig 2).

The latter design is recommended
Kratochvil[4] and Krol.[5] Kratochvil fe
that a modified T-bar engaging a dis
buccal retentive area, whether used w
a mesial or distal occlusal rest po
tion, will place torquing forces on
abutment tooth. He points out that
clasp wraps around the natural cont
of the tooth as seen when the tooth
viewed from above (Fig 5). During fu
tion, the distal part of the 'T' mo
forward and engages the distal curvat
of the tooth with resultant torque
the tooth.

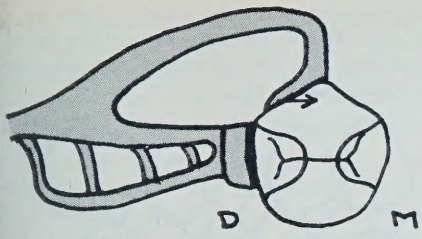
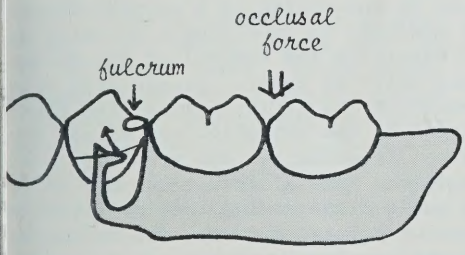


Fig 5. When viewed from above, a modified T-bar retentive tip engaging a distobuccal undercut is seen to move forward during function, whether used with a mesial or a distal occlusal rest position.

Others[6,7] disagree with this premise and ve pointed out that the direction of vement of the retentive arm, when used th a mesiocclusal rest position is nward and forward (Fig 4). The downrd component of movement causes the tentive arm to move into an area of eater undercut due to the natural curture of the tooth occlusogingivally. is occurs only when a mesiocclusal st position is used. A distocclusal st position would create a Class I le- situation,and the direction of movent of the retentive tip would be forrd and upward, engaging the undercut l torquing the abutment tooth (Fig 6).



ig 6. Rotation about a distocclusl rest position during function ill cause the retentive tip of a odified T-bar to move forward and pward, engaging the undercut and orquing the abutment tooth.

he choice between a combination clasp an infrabulge bar-type clasp adjacent a distal extension is often a matter individual preference. Both satisfy requirement of minimizing torque to abutment tooth. There are, however, tain advantages and disadvantages of h type which should be considered.

Advantages of the Combination Clasp:

- It is readily flexible in all directions.
- It may be easily adjusted to increase or decrease retention.
- It may be placed into a deeper undercut than a cast clasp and therefore may be used effectively when there is a high survey line.

Disadvantages of the Combination Clasp:

- It requires an extra step in fabrication.
- It may be distorted through careless handling by the patient.
- The alteration of natural tooth contour causes a loss of stimulation of foods during mastication.

Advantages of the Infrabulge Bar Clasp:

- When used with a mesiocclusal rest position it will direct forces away from the abutment tooth.
- It causes minimal distortion of natural tooth contour.
- It is more esthetic because it does not extend into the mesiobuccal surface of the abutment tooth.

Disadvantages of the Infrabulge Bar Clasp:

- It cannot be adjusted.
- It should not be used when there is a severe undercut.

From a practical standpoint, the type of clasp to be employed will be governed by the location of the natural retentive area on the abutment tooth.When a mesiobuccal retentive area exists, a combination clasp may be preferred. When a buccal or distobuccal retentive area is present, an infrabulge bar clasp may be the better choice. It should be kept in mind that a tooth can be recontoured and retentive areas created to obtain a more desirable clasping situation.Minor problems of abutment tooth form must not preclude using the design of choice.

OCCLUSAL REST POSITION

The positioning of the occlusal rest influences the distribution of stress to the abutment tooth and the alveolar ridge.

As mentioned previously the use of a mesiocclusal rest position allows the retentive tip of the direct retainer to

move in the same general direction as the extension base under occlusal force, thereby reducing torquing forces to the abutment tooth.

Krotochvil[4] has noted that the denture base adjacent to the posterior abutment moves in an arc almost parallel to the mucosa when a distocclusal rest position is used. The mucosa in this region provides little or no support to the denture base and the gingival papills distal to the abutment tooth may be pinched during function. He suggests a more anterior placement of the occlusal rest so that the ridge immediately adjacent to the abutment tooth would contribute to the support of the denture. Kratochvil demonstrates how a mesially placed occlusal rest provides soft tissue support more perpendicular to a greater area of alveolar ridge than does a distally placed occlusal rest (Fig 7).In addition there is less likelihood of pinching the tissue distal to the abutment tooth.

Fig 7. Greater support to the distal extension is provided by the ridge if a mesiocclusal rest position (broken line) is used rather than a distocclusal rest position (solid line).

Kratochvil[4] also suggests that a mesially placed rest tends to rotate the tooth forward because of its position in relation to the long axis of the tooth. The tooth then receives support from the teeth anterior to it. A distally placed occlusal rest would tend to tip the tooth posteriorly where support is lacking. Dipietro[6] maintains that the mesial placement of an occlusal rest will not prevent functional forces from tilting the abutment tooth distally. He points out that during the powerful masticating stroke of the chewing cycle, the mesial inclines of the lower teeth contact and slide over the distal inclines of the upper teeth until the point of maximum intercuspation is reached. This creat a distal force on the extension base a therefore on the abutment tooth throu the clasp (Fig 8).

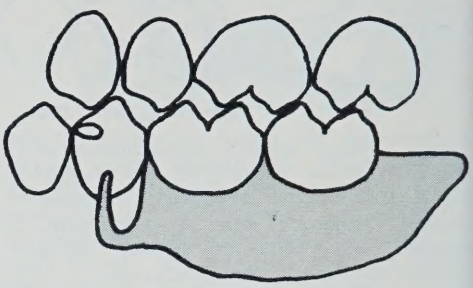


Fig 8. Masticatory forces against the distal extension, and, consequently against the abutment tooth, are in a distal direction.

A mesiocclusal rest position is nor ally not indicated where excessive too reduction would be required to perm its preparation or where esthetics is factor, as on the mesial incisal surfa of a mandibular cuspid. In these situ tions, a combination clasp with a dist cclusal rest position is preferred.

GUIDING PLANES

The preparation of parallel tooth su faces to act as guiding planes is desi able in the design of a partial dentur In addition to providing a definite pa of insertion and removal of the dentur they help to ensure predictable cla retention by reciprocating the flexi action of the retentive arm as the app iance is moved to and from its seat position. Special attention must be pa to guide plane design for a distal e tension partial denture due to the ro ational movement of the denture abo the fulcrum during function.

Kratochvil[4] recommends a distal gui ing plane which includes the entire di tal surface of the abutment tooth. adjusts the completed framework in t mouth with a pressure indicating sol tion of chloroform and rouge by applyi finger pressure to the framework to si ulate functional movement. There a certain disadvantages to this techniqu Resorption of the alveolar ridge wi result in increased rotation about t fulcrum line with the possibility torquing forces being transmitted to t abutment tooth. The same result may o

r if inadequate finger pressure is ed to simulate functional forces. An- her disadvantage is the gross tooth duction often required to achieve a ll occlusogingival distal guide plane.

McCracken[8] suggests a distal guide ane to occupy the occlusal one-third the distal surface of the abutment oth, thereby creating an undercut be- w the guide plane for the proximal ate to move into during function. How- er, movement about the fulcrum is ro- tional. Since the proximal plate ntacts the distal guide plane as a raight line occlusogingivally rather an as the arc of a circle having its nter of rotation at the occlusal rest, e potential for torquing forces still ists (Fig 9).

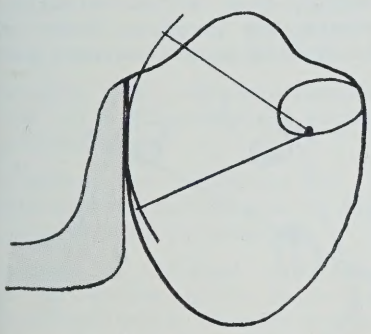


Fig 9. The proximal plate is prevented from moving in an arc by the straight distal guide plane, and may therefore transmit torquing forces to the abutment tooth.

Krol[5] suggests placing the superior ge of the proximal plate at the bottom the prepared guide plane,which should at the junction of the occlusal third l middle third of the tooth. During ction, the proximal plate moves ging- ally and slightly mesially into the dercut of the tooth, greatly reducing e likelihood of torquing forces being ated (Fig 10).

The distal guide plane should occupy e occlusal one-third of the distal face of the abutment tooth,and should end slightly around the distolingual ner of the tooth. A minor connector ns the mesiocclusal rest to the ling- bar and contacts a prepared mesio- gual guide plane for approximately e-fourth the height of the lingual

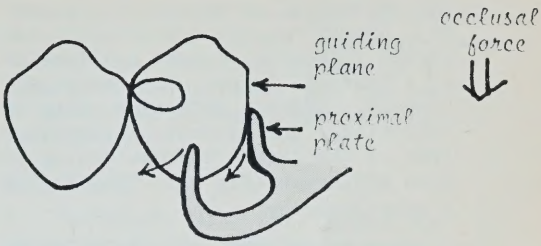


Fig 10. The proximal plate makes a line contact with the bottom of the prepared distal guide plane and moves downward and forward into the distal undercut during function.

surface. The proximal plate then assists the minor connector in providing reciprocation against the horizontal forces exerted by the flexion of the bar clasp retentive tip during insertion and removal of the denture. An alternative is to provide a lingual bracing arm.

The accumulation of food debris in an undercut below a guide plane can be prevented in most cases by good oral hygiene instruction to the patient.

INDIRECT RETENTION

The design of the distal extension partial denture must include provision for adequate indirect retention to counteract lifting of the distal extension bases away from the tissues. The indirect retainer should be placed as far from the distal extension base as possible in a definite rest seat on a tooth capable of supporting this function.[9] A common mistake is to believe that a lingual plate will provide adequate indirect retention. Forces then are directed against an inclined plane rather than along the long axis of the tooth. Not only is the indirect retention less effective, but also tooth movement and slippage of the denture may occur.

Other factors which contribute to the effectiveness of indirect retention are:

- The effectiveness of the direct retention. Lifting of the extension bases away from the underlying tissue challenges the resistance offered by the direct retainer. Rotation then occurs about the retentive tips of the direct retainers and is counteracted by the action of the indirect retainers (Fig 11).

- The mechanical advantage of the lever. Avant[10] has demonstrated how indirect retention is an application of a Class II lever. The key to increasing indirect retention lies in decreasing the mechanical advantage (ma) of the lever thereby making it less efficient (Fig 11). This can be accomplished by:
  - shortening the effective length of the power arm (pa) by providing a decreased surface area for the dislodging forces to act upon (e.g., by reducing the number of artificial teeth on the denture), and
  - lengthening the resistance arm (ra) by:
    - placing the indirect retainer as far from the denture base as possible, and
    - placing the retentive clasp tip as near to the denture base as possible (e.g., with a bar-type clasp engaging a distobuccal undercut).

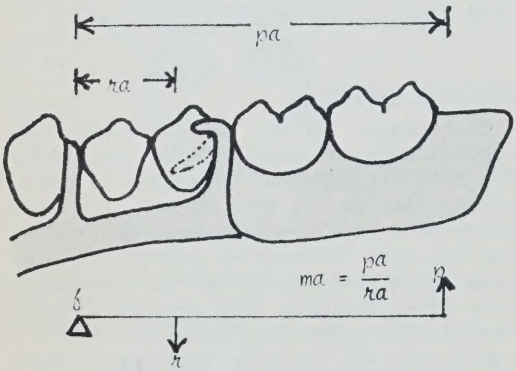


Fig 11. Indirect retention as an application of a Class II lever, with fulcrum (f), resistance (r), power (p), power arm (pa), and resistance arm (ra).

The tooth surfaces best suited physiologically and esthetically to providing indirect retention are, on the lower arch, the distal incisal surface of the first bicuspid, and on the upper arch, the lingual surface (cingulum) of the cuspid.

DESIGN OF THE CLASS II PARTIAL DENTURE

The same principles of design apply to both the unilateral and bilateral distal extension partial dentures. One import ant consideration of a Class II partia denture is the type of direct retaine to be used on the abutment anterior the modification space. When an occlusa force is applied to the unilateral dis al extension, a fulcrum line is create passing through the occlusal rest of t abutment on the distal extension si and the occlusal rest of the most dist abutment on the opposite side. Rotati of the partial denture occurs about th fulcrum line. A cast retentive arm, e ther circumferential or bar-type, on t abutment tooth anterior to the modific tion space will rotate upward, engagi the undercut and torquing the abutme tooth (Fig 12). A retentive clasp arm wrought wire or PGP alloy is indicat in this situation as it is able to fl more readily than a cast retentive a and reduces any torquing force whi might be applied to the abutment tooth

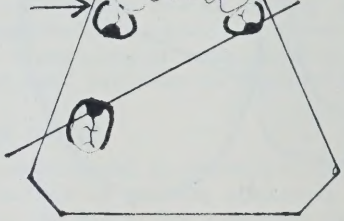


Fig 12. The retentive arm of the clasp anterior to the modification space (indicated by arrow) must be flexible so that rotation of the partial denture about the fulcrum line during function will not torque the abutment tooth.

CONCLUSIONS

A cast circumferential clasp shou not be used as a direct retainer on abutment tooth adjacent to a distal e tension.

A bar-type infrabulge clasp in conju ction with a distocclusal rest positi should not be used as a direct retain on an abutment tooth adjacent to a di tal extension.

A combination clasp, comprised of wrought wire or PGP alloy retentive a in conjunction with a distocclusal mesiocclusal rest position, may be us

; a direct retainer on an abutment ›oth adjacent to a distal extension.

A bar-type infrabulge clasp in conjun-:ion with a mesiocclusal rest position ıy be used as a direct retainer on an ›utment tooth adjacent to a distal ex-ɛnsion.

The advantages of a mesiocclusal rest ›sition over a distocclusal rest posit-›n are such that its use is indicated ıenever possible on an abutment tooth ijacent to a distal extension.

Guiding planes should be used, and ıould be designed so that the proximal .ate of the denture framework can move ıto an undercut below the distal guide .ane as the partial denture rotates ›out the occlusal rest during function.

Indirect retention is essential to the ɛsign of the distal extension partial ɛnture and can be maximized by:

- placing the indirect retainers as far from the distal extension as possible, and
- placing the retentive tip of the direct retainer as near to the distal extension as possible.

The need for indirect retention is re-ced by decreasing the surface area of e occlusal table thereby reducing the ea upon which dislodging forces can t.

MMARY

The problems presented by the distal extension partial denture are unique. They must be recognized and steps taken to overcome them. This article delineates some of these problems and how they can be minimized through proper partial denture design.

REFERENCES

1. McCracken, W.L. *A Comparison of Tooth-borne and Tooth-tissue-borne Removable Dentures.* J. Prosthet. Dent. 3: 375-381, 1953.
2. Applegate, O.C. *The Partial Denture Base.* J.Prosthet.Dent. 5:636-648, 1955.
3. Henderson, D., and Steffel,V.L. *McCracken's Partial Denture Construction,* 3rd Edition, Saint Louis, 1969, The C.V. Mosby Company, p. 146.
4. Kratochvil, F.J. *Influence of Occlusal Rest Position and Clasp Design on Movement of Abutment Teeth.* J. Prosthet. Dent. 13:115-124, 1963.
5. Krol, A.J. *Clasp Design for Extension Base Removable Partial Dentures,* J. Prosthet. Dent.29:408-415, 1973.
6. DiPietro, G.J., *Personal Communication, 1972-1973.*
7. Robinson, C. *Clasp Design and Rest Placement for the Distal Extension Partial Denture.* Dental Clinics of America, Vol 14, No 3, July 1970.
8. Henderson, D., and Steffel,V.L. *McCracken's Partial Denture Construction,* 3rd Edition, Saint Louis, 1969, the C.V. Mosby Company, p. 69.
9. Idem, p. 166.
10. Avant, W.E. *Indirect Retention in Partial Denture Design.* J.Prosthet.Dent. 16:1103-1110, 1966.

›urgical Correction of Inflammatory 'apillary Hyperplasia)f the Palate

Captain R. Y. Gish, DDS.

Inflammatory papillary hyperplasia is oral pathosis of unknown etiology ıerally associated with ill-fitting ıtures and poor oral hygiene.[1] The con-dition is usually confined to the hard palate but the maxillary and mandibular ridges are occasionally involved. Sex distribution is not a significant factor

but the condition is most often associated with patients past middle age.

The lesion consists of small, tightly packed, wart-like papillary growths. Palpitation reveals these growths to be soft and spongy, and a stream of air directed at the site will separate them and reveal their length. Generalized redness of the area, associated with secondary infection from food debris trapped between the papillae is a common finding.

Microscopic examination of such lesions sometimes reveal foci of epidermoid carcinoma.[2] The condition should be treated as soon as possible, not only to reduce the possibility of such sequillae but also to improve denture stability, oral hygiene and the general health of the patient.

TREATMENT

Some authorities suggest that, when discovered early, remission can be obtained by removing the denture and rebasing it when the tissues return to normal. It is more commonly postulated, however, that although the tissue appears to be improved by such treatment, the papillae remain and should be excised to nullify the possibility of malignant change.[3]

Electrosurgery is the method of choice but most clinics do not have the necessary equipment. Removal of the papillae with coarse rotating stones has been attempted, but this procedure is slow and traumatic. Treatment with a Kingsley denture scraper has produced satisfactory results, and an outline of the method follows.

ARMAMENTARIUM

A sharp #6 Kingsley scraper is the instrument of choice, but a #2 scraper will facilitate access to confined areas such as a high, narrow vault. A scalpel or scissors may be required to remove tissue tags. Gauze sponges and/or suction are used to clear the site of excised debris and blood.

Resilient reline material (Hydrocast, Coe-Comfort, etc) provides post-operative comfort and improves denture stability.

PROCEDURE

When the palate is anaesthetized, hold a gauze sponge behind the operative sit to prevent blood and debris from flowin into the pharynx. To enhance vision, star at the back of the area to be excise and, using firm pressure, draw the King sley scraper in a forward direction an totally remove the papillae and epithe lium. These tissues come free readil and a firm, fibrous connective tissu base ensues. If difficulty is encount ered between the rugae, the #2 scrape will prove useful.

When all of the involved area has bee treated, the denture should be reline with a soft material, as described b Richardson.[4] A thin coat of petroleu jelly or sodium alginate separatin fluid facilitates trimming the exces reline material and its eventual remova from the tissue-bearing area.

Replacement of the tissue conditionin material is usually required three o four days post-operatively to avoid irr itation during healing, but subsequen applications may be left longer. Epith elialization is usually complete afte four to five weeks, at which time th denture can be permanently rebased.

DISCUSSION

Before treatment is undertaken, th patient must be fully informed of th nature of the problem, the necessity fo treatment and the procedures he mus subsequently follow to reduce the possi bility of a recurrence of the condition including the special oral hygiene proc edures which pertain to edentulous pat- ients and the requirement for regula oral examinations. Some difficulties ma be encountered with patients who asses the treatment as both radical and pain ful. They should be assured that it in volves a short operative time and tha there is little post-operative pain.

SUMMARY

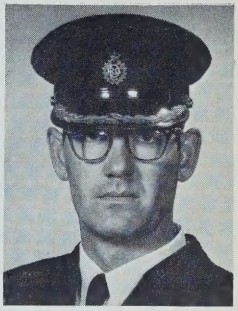
A simple procedure for surgical cor rection of inflammatory papillary hyper plasia of the palate has been described The methods recommended for dental offi cers who do not have access to more ela borate surgical equipment, involves th use of Kingsley scrapers both to elimin ate lesions which can become malignan and to produce a healthy, firm base fo a new or rebased denture.

FERENCES

Shafer, W.G. et al. *A Text Book of al Pathology*. Philadelphia and London, B. Saunders Company, 1963, p. 450.
Bhaskar, S.N. *Synopsis of Oral Pathogy*. Saint Louis, C.V. Mosby Company, 65, p. 355.
3. Archer, W.H. *Oral Surgery:A Step-by-Step Atlas of Operative Techniques*.Philadelphia and London, W.B. Saunders Company, 1966, p. 1041.
4. Richardson, L.A. *Restoring Tissue Health Under Dentures*. R.C.D.C. Quarterly, Vol 6, No 3, October 1965.

Case Report:

listiocytosis X of the Mandible



Major F. H. Harreman, BSc, DDS.

In 1953 Lichtenstein[1] integrated eosophilic granuloma of bone, Hand-Schulr-Christian disease and Letterer-Siwe sease into a sympton complex of the ticulo-endothelial system known as stiocytosis X. These clinical entities unknown etiology share a basic underling proliferation of histiocytes and represent different phases of the ne pathologic process.

Focal histiocytosis X is confined to ne without extraskeletal involvement l represents the most benign form of disease. The lesions occur in medullry bone, most frequently in the skull, s and pelvis; the cortex is often perated; they occur mainly in children l young adults; pain may or may not be factor but they may predispose to thologic fracture of the spine or long nes.

The chronic, disseminated form of the sease, Hand-Schuller-Christian (H-S-C) l the acute or sub-acute form, Letter-Siwe (L-C) are characterized by widespread skeletal and extraskeletal lesns involving bone, skin, lymph nodes l viscera. H-S-C occurs in children l young adults, while L-S is usually stricted to infants and children under ree years of age. The prognosis in se instances is poor and death is not frequent, particularly with respect to latter form.[2]

Treatment is varied.[2,3,4,5]Local curettage and/or low-dose radiation(500-1500 rads) is recommended for focal histiocytosis,[5] while antibiotics, corticosteriods, and chemo-therapeutic agents (methotrexate, vinblastin) are prescribed for disseminated forms. Occasionally the lesions are self-limiting.

The definitive diagnosis of histiocytosis requires histopathologic evaluation while the extent of the disease is determined by clinical signs and symptoms.

CASE REPORT

The following is a case report of focal histiocytosis to the mandible.

On 14 August 1972 a 34 year old caucasian female presented to the Oral Surgery Service, Letterman Army Medical Center (LAMC) with a complaint of pain to the right mandible.

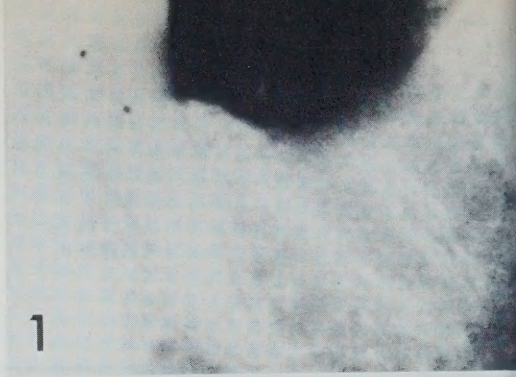
One month previously her right second mandibular molar had been extracted, because of persistent pain to the tooth,by a civilian dentist. According to the patient, the extraction was a"difficult" one and during the operation her jaw "popped". When no relief from the pain ensued, she obtained a prescription for penicillin from the dentist and after taking this medication she developed "hives". She had returned to the dent-

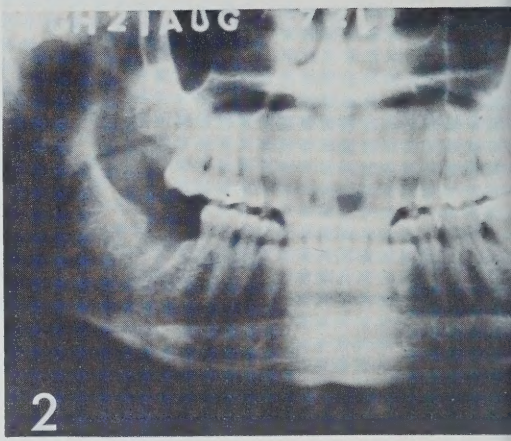
ist, who gave her another prescription which she did not have filled.

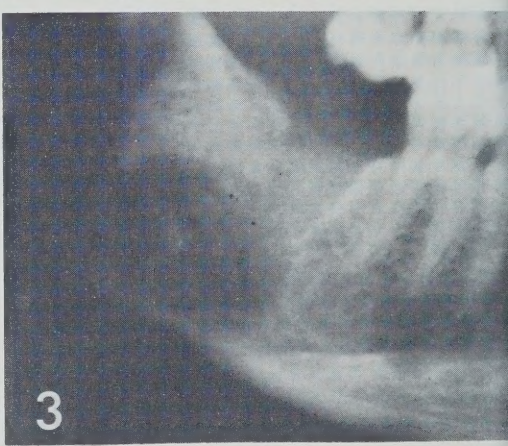
Examination revealed ulceration and bone sequestrum on the lingual aspect of the right mandibular second molar area. Pus could be expressed from the site and there was moderate edema and erythema. She exhibited a 10mm intermaxillary opening and there was pain but no crepitus in the right tempero-mandibular joint. Her oral temperature was 98.9°F. A periapical radiograph (Fig 1) revealed a fresh extraction site with an apical radiolucency suggestive of a periapical abcess.

Initial treatment consisted of sequestrectomy of two cortical spicules and conservative debridment of the socket area. Seven days later there was increased pain in the area and a temperature of 99.4°F. Iodoform gauze with eugenol was applied, following which the pain was decreased and the temperature returned to normal. Over the next three weeks the patient was then seen as an outpatient and her symptoms did not subside. Interim ENT and Periodontal consultations ruled out ear pathology and TMJ dysfunction. X-rays, including orthopantamograph, periapical and oblique mandible views, revealed a circumscribed, hazy radiolucency (20X25mm), apical and distal to the socket. The patient was admitted to LAMC 18 September 1972 for surgical exploration of the radiolucent area. A tentative diagnosis of chronic osteomyelitis was made.

Her medical history was unremarkable except that acute abdominal pain of unknown etiology two years previously, and allergy to penicillin, were reported. The







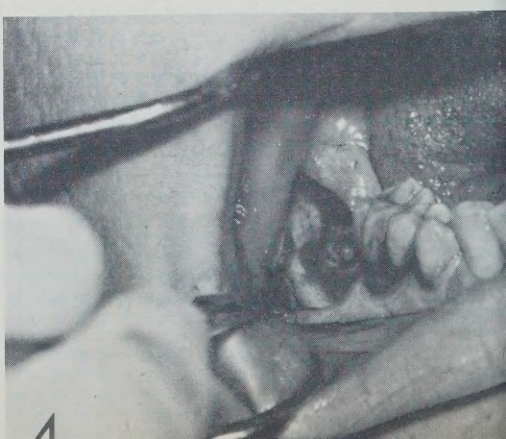


Fig 1. Periapical radiograph of right mandibular molar area. Note radiolucent area at apex of extraction socket.

Fig 2. Panoramic radiograph demonstrating large well-defined radiolucency of right posterior mandible and questionable bilateral radiolucencies located apical to the mandibular second premolars and first molar.

Fig 3. Right mandible view demonstrating large radiolucency.

Fig 4. Right mandible - exposure of socket area of the second molar. Note the tissue within the socket which was soft, friable and yellow-gray in colour.

ysical examination was within normal mits except for the oral findings. The cket contained a soft, yellow-gray terial. Blood analysis revealed WBC of ,500 with 65% neutrophiles, 211 lymph-ytes, 10% monocytes, 3% eosinophiles, d 1% basophiles. The hematrocrit was vol % and hemoglobin 16.3 gms %. Ur-alysis was within normal limits. The A-12 survey was normal except for ele-ted alkaline phosphatase of 120 mu/ml. e sedimentation rate was 11mm/hr.Sero-gy was non-reactive and Tine test neg-ive. PA and lateral chest films were rmal. Orthopantamograph and oblique ndible films revealed a radiolucent sion of the right mandible (Fig 2, 3). e orthopantamograph also revealed rad-lucent areas apical and between the ndibular right and left second bi-spids and first molars.

)n 19 September 1972 surgical explora-)n, debridement and curettage was und-taken under local anaesthesia and int-venous sedation (Fig 4,5). The tissue ined was soft, friable and yellow-gray colour. The tissue was submitted for stophathologic evaluation and a cult-e was taken. The defect extended in-rior to the neuro-vascular bundle (Fig and perforated the lingual cortex at e most inferior and posterior aspect. space-occupying dressing was placed, r post-operative course was uneventful cept that she experienced paraesthesia the right lower lip and chin.

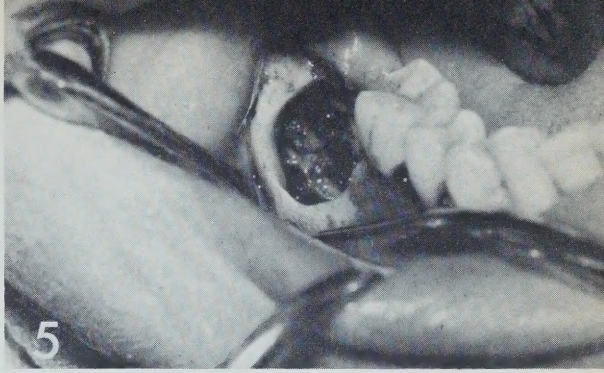
The histophathological diagnosis was stiocytosis X (Figs 6,7,8). The cult-e grew moderate alpha streptococcus d light neisseria.

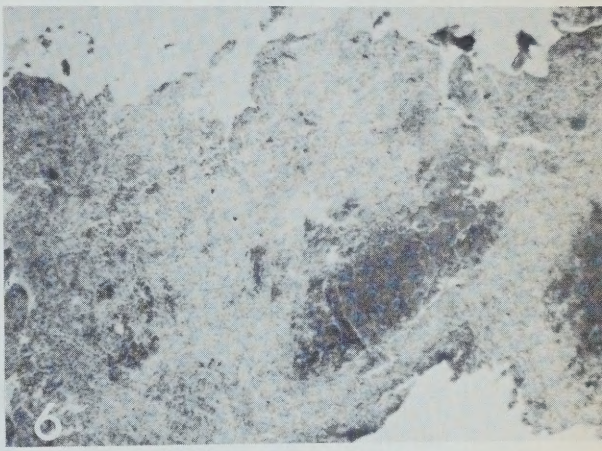
Fig 5. Right mandible - debridement ferior to neurovascular bundle which intact.

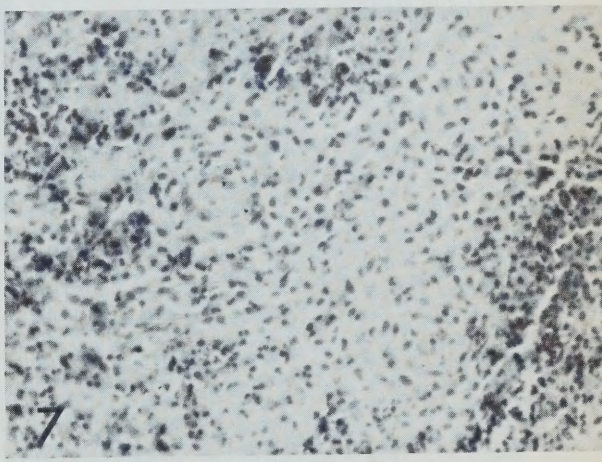
Fig 6. Low power view. Note the cell-ar nature of the lesion with a central rk staining area of necrosis. The ghter areas are sheets of histiocytes. gnification 35X.

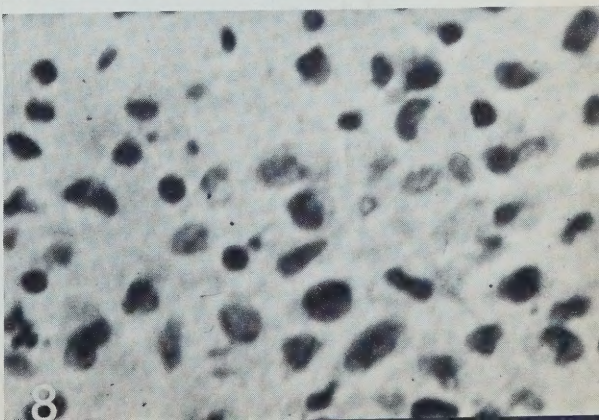
Fig 7. Low power field demonstrating eets of histiocytes with central dark ea of eosinophilic infiltration. Mag-fication 35X.

Fig 8. High power view of histiocytes. gnification 450X.









Follow-up skull films and skeletal survey were normal with no evidence of lytic lesions (Fig 9).

The patient was discharged 10 days post-operatively. The dressing was removed and the defect appeared to be granulating nicely (Fig 6). She was followed as an outpatient until 6 November 1972 and was asymptomatic throughout. She moved to Mississippi and is being followed at Keesler AFB. Eight month post-operative X-rays revealed normal bone fill in the defect.[11] There was no change in the bilateral radiolucencies apical to right and left mandibular bicuspid and molar areas.

COMMENT

Oral involvement in histiocytosis occurs in a surprisingly large number of diagnosed cases and may indeed be the first manifestation of the malady.[4,6,7,8,9,10] Gingival ulcerations, bony erosions, loosening and early loss of teeth may provide the clue to the diagnosis and lead to early definitive treatment which is often curative.

Roentgenographic shadows may mimic various benign and malignant conditions.[6,7,8] The peculiar nature of the mandible (odontogenesis) and the potential for dental disease may further confuse the issue, e.g., in this instance the disease was masked by a history and clinical course which suggested it was of dental origin. There are no significant laboratory findings, and biopsy is the only reliable diagnostic tool, particularly where there is no dissemination.[9,10] Since focal histiocytosis may involve more than one bone, and may herald dissemination, a thorough search for other sites of involvement is mandatory. Careful follow-up is also required to determine possible progression of the disease. In the case reported it appears that the lesion was solitary and that a cure was effected. Continued surveillance is still indicated.

SUMMARY

A case of localized histiocytosis X of the mandible has been reported and the importance of dentists being aware of the pathophysiology of histiocytosis has been emphasized.

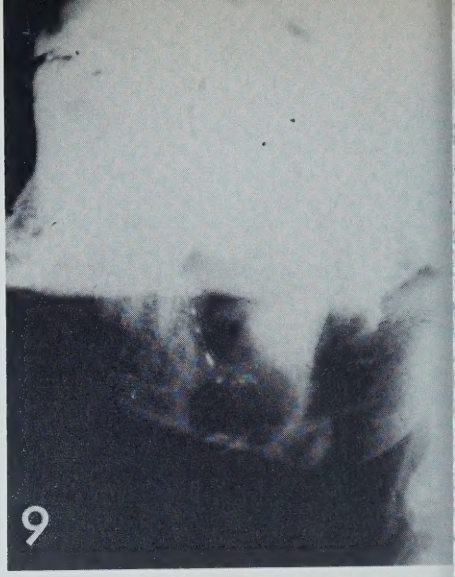


Fig 9. Post-operative right obliqu radiograph of mandible.

Fig 10. Right mandible - 10 days post operative. Note granulation tissue wit in socket.

REFERENCES

1. Lichtenstein,L. *Histiocytosis X. I tegration of Eosinophilic Granuloma Bone, "Letterer-Siwe Disease" and"Schu ler-Christian Disease" as Related Man festations of a Single Nosologic Entit* Arch. Pathol. 56: July 1953.

2. Oberman, H.A. *Idiopathic Histioc tosis: A Clinicipathological Review the Literature on Eosinophilic Granulo of Bone, Hand-Schuller-Christian Disea and Letterer-Siwe Disease*.Pediatrics 2 August, 1961.

. Winkelman, R.K., and Burgert, E. O: *ıerapy of Histiocytosis X.* Brit.J.Derm. ?: February, 1970.
. Sigala, J.L., Silverman, S., Brody, .A., and Kushner, J.H.: *Dental Involve-ent in Histiocytosis.* Oral. Surg. 33: ınuary, 1972.
. Ochsner, S.F.: *Eosinophilic Granu-oma of Bone: Experience with 20 Cases.* ı. J. Roentgenology 97: July, 1966.
. Jones, J.C., Lilly, G.E., and Marl-:te, R.H.: *Histiocytosis X.* J. Oral ırg. 28: June, 1970, p. 462.
. Trodahl, J.N., Allman, R.M.: *RPC of ıe Month from the AFIP.* Radiology 93: :tober, 1969.
. Sedano, H.O., Cernea, P., Hosze, G., and Gorlin, R.J.: *Histiocytosis X:Clinical, Radiologic, and Histologic Findings with Special Attention to Oral Manifestations.* Oral Surg. 27.
9. Sleeper, E.C. *Eosinophilic Granuloma of Bone: Its Relationship to Hand-Schuller-Christian and Letterer-Siwe's Diseases, with Emphasis Upon Oral Symptoms and Findings.* Oral Surg.4:July,1951.
10. Blevins, C., Dahlin, D.C.,Lovestedt, S.A., and Kennedy, R.L.J.: *Oral and Dental Manifestations of Histiocytosis X.* Oral Surg. 12: April, 1959.
11. Personal Communication - Wooten,J.W. Lieutenant-Colonel, Oral Surgery Service U.S.A.F. Medical Center, Keesler A.F.B., Mississippi.

FISH STORY

ıme the twenty-five of June in Seventy-three
jor Bill decide a fisherman he gonna be;
ep aboard the "Malia" with the skipper Butch Lee
take a little fiddy from the deep blue sea.

Thus goes the first verse of a popular tty being sung in all the better bis-os along the Kona coast. Major Bill rreman tells the story this way ...

"I caught a Pacific Blue Marlin. He s 11'6", weighed 500 lbs., and was ught on 140 lb. test line in 42 min-es off the Kona Coast, big island of waii.

There are some who would doubt this ief claim to fame. However, this hor-ndous event did occur. The fish hit. was strapped in the chair and the ght was on. It was miserable! Waves nausea, head in the bucket, up for r, back to the bucket. Back ached, ms ached, lungs ached, then the chair sintegrated ... legs, arms and bucket nt flying. The epidermis on my derr-re could not stand the punishment and cided to leave my person.

We brought the beauty on board with ock and tackle. For the next fifteen

minutes the marlin and I shared quarters, both of us prostrate on the deck. He was somewhat malodorous and once again I sought the comfort of my bucket. It was not until the Malia sailed into port, with the marlin flag flying that a tingle of satisfaction reached me. That evening the local radio station broadcast my good fortune. It was then that the full magnitude of the event was fully appreciated.

11th CFDS GOLF TOURNAMENT

CFB TRENTON

27~28 SEP

Golf Report

This year's tournament attracted 89 golfers of various skills and abilities with about 115 personnel attending the presentation dinner. All dental units including 35 Field Dental Unit, Lahr, were well represented.

King Sol blessed the tournament with two excellent days of sun with golfers and spectators alike taking advantage of the fine weather.

A total of 36 prizes were awarded, including a door prize and the golf bag draw.

Statistics are available in regards to the amount of beverages consumed and who consumed them. Unfortunately space does not permit us to publish these facts.

The Tournament Committee extends a sincere vote of thanks to that particular individual who makes this tournament what it is - *THE GOLFER*. See you next year!

PRIZES AWARDED

Tournament Net Trophy:	Mr B Pollock
1st Low Gross 1st Flt:	Sgt MJ Hall
1st Low Gross 2nd Flt:	Maj BW Yates
1st Low Gross 3rd Flt:	Sgt J Armstrong
1st Low Net 1st Flt:	Sgt GM Anderson
1st Low Net 2nd Flt:	Maj HS Wood
1st Low Net 3rd Flt:	MWO R Matheson
2nd Low Gross 1st Flt:	Mr T Batten
2nd Low Gross 2nd Flt:	Dr C Sivell
2nd Low Gross 3rd Flt:	Sgt JR Curtis
2nd Low Net 1st Flt:	Mr J Clint
2nd Low Net 2nd Flt:	Maj AJ Nadeau
2nd Low Net 3rd Flt:	MCpl WH Renwick
3rd Low Gross 1st Flt:	LCol IAC MacDonald
3rd Low Gross 2nd Flt:	MWO TA Bradley
3rd Low Gross 3rd Flt:	MCpl T James
3rd Low Net 1st Flt:	Cpl GR Lamontagne
3rd Low Net 2nd Flt:	Sgt D Cormie
3rd Low Net 3rd Flt:	Capt DM Clark
Best Woman Golfer:	MWO C Torrens
Closest to Hole	
(No 17) Thursday:	Capt R Salois
(No 3) Friday:	Col G MacDougall
Longest Drive	
(No 18) Thursday:	MWO R Todd
(No 2) Friday:	Maj R Headley
Most Honest Golfer:	MCpl MN Boles
Golf Bag Draw Winner:	Capt HA Chestnut

Photo 1. BGen Evans presenting the RCDC (R) Officers, Trophy to 14 Dental Unit team: Maj RH Headley, Capt DR Wright and Cpl GR Lamontagne, for lowes gross aggregate score over 36 holes.

Photo 2. BGen Baird presenting the KM Baird Trophy to WO (ret'd) W Hill fo low gross score over 36 holes.

Photo 3. Col Covey presenting the GR Covey Trophy to Maj MB Fisk for low gross score over 18 holes.

Photo 4. Col Thompson presenting a prize to Mr B Pollock for Tournament Low Net.

Photo 5. The happy winner of the gol bag draw - Capt HA Chestnut.

CFDSS news

by Chief Warrant Officer W.D. Morris

Follow that cook!

It all began as 22 vehicles pulled away from the CFDSS early one Monday morning, headed for Meaford-on-the-Bay, the site of this year's summer camp for Embryonic Dental Officers. What follows is the story of how 47 striplings of the DOTP and their four leaders survived the perils of the forest for two weeks during which they learned, or were at least exposed to, the rigors of practicing their future profession under adverse conditions in the field. We "old-timers" would offer sympathy, as we recall our own days under canvas, were it not for the fact that in support they had a crew of not two, or even three, cooks, but would you believe it - 21!!

As in all such camps, there was a natural division in age and interests and so the junior boys, under the code name Phase II were, for the purpose of training, kept quite separate from the senior and much more experienced group - the Phase IIIs. "Akala" for the younger boys was Major Pete McQueen, whose subsequent promotion attests to his able leadership and having weathered the potential pitfalls of several PERs. His assistant was Sgt Busse who, as we go to press, is carrying the rank of sergeant. The equivalent leaders with the Phase III Scouts were Capt Pilon and Sgt Albertson.

In the best military tradition the first tasks after arrival at the site were to get the trucks hidden, pitch the tents, locate fire points and establish a POL dump. As the sun sets on this first day and we gather around the campfire, toast marshmallows, drink lemonade and tell lies, it seems fitting to explain why there were exactly 21 cooks to cater to the appetites of 51 campers. The uninitiated might voice opinion that whoever was in charge couldn't find 30 more cooks, but those of us who are experienced in such matters will realize the foresight and careful planning involved in having this exercise coincide with a PL3 field requirement for 21 pot-

ential "maitres-de-cuisine". It has been reported that some of the cooks were also exposed to "piscatorial poaching". On the day a high-ranking officer visited the encampment, one of the four items on the menu was fresh caught pickerel - and the season hadn't even opened!

The serious purposes of the exercise began on Day Two when the Phase II contingent was tasked with taking radiographs and charting the "dental patients". Through reciprocal agreement, those 21 cooks were assigned this role and that same afternoon were turned over to the Phase III lads for treatment. For the next eight days the generators were humming from dawn to dusk. What can be rarer than a group of cooks who are dentally fit?

The Phase II group spent the bulk of their time performing open-air "brush-ins" on groups of 120 members of the Cadet Services summer training school who were bussed in to the Meaford area each day from Borden for this purpose. Each of them received brushing and flossing instruction as well as the brush-in and a short lecture on oral hygiene.

Time flew by and the only known records are contained in some pictures and video tape footage taken by a team from CFDSS consisting of CWOs Morris and Laurence and Cpl Payette.

There are rumors of many other incidents known only to those who attended the exercise. But for those readers who wish to pursue the subject, the "catch-phrases" that will elicit long-winded reminiscences are:

...that evening of training (?) films shown at Bo-Jangles Gasthaus...

...waking to the sound of exploding immersion-heaters...

...watching Easterners riding the chorehorse...

...the cloudburst for the Commandant's visit...

...eating hard boiled eggs c/w shells at 0430 hours...

..."And the night shall be filled with music,
And the cares that infest the day
Shall fold their tents as the Arabs
And as silently steal away."

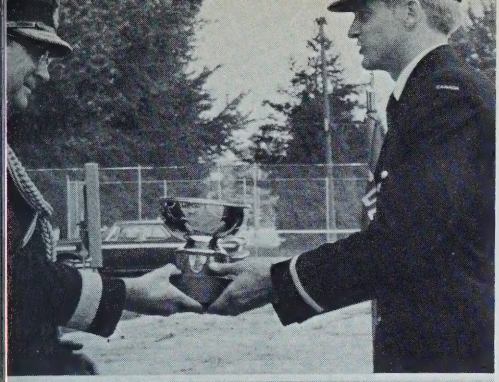
Top. "Smile?? What do you think this is - a picnic?? Sgts AJ Busse and GA Albertson.

Bottom. Capt "The Turk" Pilon, Phase III Exercise Director, on D Day.

As all vacations must, this one finally ended as early, early in the morning, with Phase III leading the way, the vehicles pulled out for Borden and its showers. The trucks are all nice and clean now, parked away in the compound waiting for next year. The red-coded cooks are all parked too - in their respective kitchens, and the DOTP candidates are letting their hair grow.

* * * *

The training ended on a pleasant note as the summer soldiers conducted their graduation ceremonies and received recognition for their diligent efforts. BGen Garth C Evans, DGDS, presented awards to 2Lt RB Johnson, University of Manitoba, Third Phase Honour Cadet; 2Lt CC Cann, Dalhousie University, Third Phase Honour Cadet Runner-Up; 2Lt PM Lobb, University of Alberta, Second Phase Honour Cadet; and 2Lt WH Fallon, University of Manitoba, Second Phase Honour Cadet Runner-Up.



)p. 2Lt PM Lobb receiving the 2nd Phase)nour Cadet Trophy from BGen Evans.

)ttom. 2Lt RB Johnson receiving the :d Phase Honour Cadet Trophy. ("Oooops, e nearly dropped it, didn't we, sir?")

ALLY MITRIKAS GOLF TOURNAMENT

Once more it was time for the CFDSS :aff and DOTP cadets to practise those .ld swings and play their part in pro- .ding employment for the golf ball manu- ıcturers.

It was not an unusual sight for play- :s, partially eaten by mosquitoes, to :agger from the bush exclaiming, "I've)und it, I've found it."

One player, covered with sawdust, emerg- from an area where a chain saw could heard, panting: "No, it was a perfect .e, a clear path through the bush to ıe green."

And, "Yes, you have to count a sun :roke."

The array of prizes at the banquet was :omething else". Bill Parker and his)mmittee received and deserved a sincere)te of thanks.

Top. John Clint receives the Wally Mitrikas Trophy from Col Craigie.

Bottom. LCol Reynolds presents WO Davies with the Low Net Trophy.

1 DENTAL UNIT news

by Sergeant M.Y. Fletcher

PERSONNEL UPDATE

The summer of '73 brought with it more than the usual number of arrivals and departures. As the dust settles we find among the new faces in the Ottawa area: Maj Carver, Capts Boulanger, Bowes, Chagnon, Rowat and Sgts Sandy Kirley and Bob Wormington ... Those now missing from our files: Capt Greg Ames, currently decorating the halls of CFDSS, Sgt Bruce Hannay, enjoying European hospitality at CFB Lahr, MCpls Jim Likens and Bob Gayler, now terrorizing peaceful P.E.I., Cpl Dawn Duncan, now adding a little more sunshine to the B.C. coast ... Temporary absentees include Sgt Ron Linsay, vacationing in Cyprus for six months, Cpls Manon Brosha and Wayne Leach, sweating it out on their DA training course at Borden.

HAPPENINGS

MWO Earl McFadden and Sgts Helmut Markwort and Rene Tremblay recently qualified as Denture Therapists and Registered Dental Technicians in the Province of Ontario.

LCol Hillier and MCpl Lyall Kallman were "over there" to view the new clinic at CDLS London and tee-up installation of some not so new dental equipment. Extremely dedicated, Lyall has volunteered to make a return trip to make sure that the light switches work properly.

A face lifting for the PD room at CFB Ottawa (South) has resulted in sitting down on the job. Stools have been provided, mirrors lowered and plaque lights installed.

LCol Chatwin beat the heat this summer by installing a full size pool in his back yard. To celebrate the occasion he held a party for the NDMC staff. The theme had to be "skin is in" - I mean there was just that much of it around! Maj Rod Carver and Sgt Ethyl Snippa were two of the unwilling super splashes heard that night.

LCol JVP Chatwin congratulating MWO Earl McFadden on being awarded the 1st Clasp to the CD and WO Henry King on receiving the CD.

Capt Greg Ames no longer ranks as our most eligible bachelor. The result of Greg's six month tour in Cyprus was his marriage on 14 July to Miss Maureen Lunney, a lovely lass from the Scottish Isles. The honeymoon couple are now residing in the sand flats of Ontario - Borden (a wedding gift from the Dental Services??).

Sgt Ethel Snippa being congratulated on her award of the 1st Clasp to the CD by BGen Garth C Evans with LCol JVP Chatwin looking on. Sgt Snippa joined the Canadian Forces in Edmonton and served with both land and sea elements before integration. She came to 1 Dental Unit this year and has made a name for herself as both the unit admin clerk and as a capable curler.

1 DENTAL UNIT news

Sergeant R.W. Boyd

ADQUARTERS

LCol AG Taylor and Capt Wm Jackson ve completed their fall liaison visits CFS Masset, CFB Chilliwack and Nanai- Military Camp. More travel is in the fing after the Canadian Dental Assoc- tion National Convention. There are ill interesting places like CFS Kam- ops and Baldy Hughes to see. Sgt Dick atton has also begun his fall migrat- n checking on the condition of equip- nt at these places ... The carpenters rived this month and are busy working wards our new office complex.

EVENTIVE DENTISTRY

Teams from the Esquimalt area have cently completed brush-ins on some of e ships as well as at Nanaimo Camp, S Masset and in the Workpoint area. A am from Chilliwack will visit Vancouv- and CFS Kamloops during October.

Much work went into the program during e past summer with over 1,500 Cadets Vernon and 800 in Comox reaping the rvest, not to mention the local Cadets tending the smaller training groups in e Esquimalt area.

TES OF INTEREST

Maj Graham attended his 5th year class union at the Overlander Lodge just out- de the Jasper Park gate. The turnout s excellent ... Sgt Looker is busy ese days, we mean nights, studying nagement in Industry and Management ychology at B.C.T.I. as well as taking course in Basic Auto tune-up at the cal high school ... Cpl Kilgrain was terviewed on a half-hour TV show on July. The discussion was about the ternational Plastic Modellers of Can- a Society ... Pte Marty Heinrichs has quested her release with plans of be- ming Mrs Terry Wiltzen of CFB Cold ke ... Cpl Duncan of the Esquimalt tachment has received her pin and dip- ma from the Canadian Dental Nurses d Assistants Association on successful mpletion of the certification exam. wn is now a Certified Dental Assistant the first servicewoman so certified.

SPORTS AND SOCIAL EVENTS

"A Day at Sea in the Life of a Dentist" was the theme as HMCS Columbia hosted all available dental staff for a cruise on 7 August. Some of the more venture- some (foolish) rode the jack-stay be- tween the Columbia and her sister ship Chaudiere.

Cpl Alkenbrack was given a fine send off at a clinic party on his posting to 15 Dental Unit, 7 August. Before they left, Arnie and his wife were presented with a trophy by members of the Work- point Teen Council for their many hours with that group.

A recount in the Halifax to Victoria Cross Canada run proved that we really try harder, raising our position as it did to Number Two, not the fourth place position we previously reported. Sgts Borden and Murley received Gold Medals for runs of 800 and 600 miles while Miss Liddle, as the foremost female in the run, earned her Gold Medal for a 600 mile effort. Guess who got kissed by the Base Commander??

The Chilliwack detachment enjoyed fine weather at their recent golf tournament held at the Harrison Golf and Country Club, which was organized to mark the departure of Captains Arnold and Rosen- gart. WO Braslin, who organized the successful event, felt a club that was good enough for the Prime Minister should be good enough for them. It was!

MCpl Skip Solomon was selected as the All Star 2nd Baseman in the Upper Island Fastball Tournament. Not to be outdone, Sgt Jerry Anderson was top man in the B.C. Dental Tournament, CFB Comox Open and the Sgts' Mess Tournament.

Capts Margetts, Croll and Schow, Sgts Anderson and Armstrong, and MCpl Boles reported good weather, good food and a good time at the CFDSS Golf Tournament. Sgt Armstrong won a prize for Low Gross C Flight and Sgt Anderson won 1st Low Net A Flight.

LCol Taylor and Capt Wm Jackson were successfully guided by Capt Milne to some fine hunting and fishing in Masset. Capt Jackson downed a deer and LCol Tay- lor, assisted by Capt Jackson and Capt Milne, bagged - yes, bagged - a 50lb halibut. This fish story, like all of Capt Watson's, needs to be told.

The CO, complete with his wife and bicycles, toured "up Island" recently. The ferry strike curtailed a proposed mainland visit so they spent a couple of days cycling on the San Juan Islands, made accessible by the Washington State ferry.

Capt Jackson is happy to have his family all together again. His two boys, aged 14 and 18, cycled from Cornwallis, N.S. to Victoria, taking two months and two days to travel the 3,700 miles.

Sgt Anderson won a position on the Base Golf Team at Comox, entitling him to a spot on the CF Pacific Regional Championship in Chilliwack.

12 DENTAL UNIT news

by Lieutenant D.E. Fraser

ATLANTIC PROVINCES DENTAL CONVENTION

BGen Garth C Evans visited the Atlantic Region 16-19 September to attend the Atlantic Provinces Dental Convention at Charlottetown. Unit members attending were: Col Protheroe, LCols Brogan and McDonald, Majs Boston, Jolly, Gray, and Meisner, Capts Donald and Hudgins, and MWO Therrien.

CANADIAN DENTAL ASSOCIATION CONVENTION

Col Protheroe attended the CDA Convention in Vancouver 13-16 October. While there he gave a presentation and was a panel member on the topic of "Employment of Dental Auxillaries". Also in attendance were Maj Daryl Brown from Cornwallis and Mrs Reath from CFH Halifax.

ASSOCIATION MEETING

Local dental assistants who attended a recent Nova Scotia Dental Nurses and Assistants Association meeting included Mrs Reath (President), Sgt Smith, MCpl George, Cpls Calnen, Forlippa, Rector, Mss Russell and Higgins.

GREENWOOD DENTAL CLINIC OPENING

The new CFB Greenwood Dental Clinic was officially opened on 31 July by Col HE Smale, the Base Commander with Col DH Protheroe, Command Dental Officer and Maj AL Kelland, Base Dental Officer, in attendance.

Top. The Base Commander, Col HE Smale cuts the ribbon to officially open the new clinic as the staff of the clinic watches. Left to right: Cpl J Oakley, OCdt EA Toporowski (3rd year dental student), Sgt CS Sabine-Pasley, Cpl VF Goman, MCpl M Boles, WO LI MacLean, Col Smale, Capt ET Dalzell and Maj AL Kell

Bottom. One of two operatories outfit with the new dentsply units.

The new air-conditioned clinic is located in the completely renovated original building. A preventive dentistry program is in full swing and currently over 90% of personnel on the base are red-coded. Following a tour of the new clinic, which Maj Kelland termed "the best service dental facility in Canada" guests, including LCol Deyette representing DGDS, were hosted at a luncheon in the Officers' Mess.

:H SCHOOL OF NURSING PRESENTATION

Maj NH Andrews, Cpls Brian Rector and
m Mountain and 2Lt Charles Cann, a
urth year dental student at Dalhousie,
de a presentation to 106 students at
e Victoria General Hospital School of
rsing on 3 October. The program con-
sted of an illustrated lecture on den-
l diseases, their cause and control.
ndicate demonstration sessions follow-
on personal oral hygiene techniques
d the care of the hospitalized patient.

Cpl Mountain of the Dockyard(Halifax)
inic and School of Nursing students.

RSONAL

MWO Reid has been driving Cadillacs
r some time and recently discovered
at it was like to have a flat tire.
ter having the tire fixed Harvey felt
nfident he was over his difficulties.
: a funny thing happened to him on
e way to work next day. After seeing
wheel roll past him, he realized that
three-wheeled Caddy is difficult to
ld on the road ... LCol Brogan is the
w president of the Oromocto district
uncil for Cubs, Scouts and Venturers.
e new secretary for the group is WO
herton and Cpl Parker is the treasur-
... Capt Paul Lavallee recently be-
me a leader with the Oromocto Sea
outs.

TIREMENT

On 4 September Halifax-Dartmouth mem-
rs of the unit gathered to bid fare-
ll to MWO John Hutchinson, DEMT. John
s served for 25 years at various bases
cluding Petawawa, Trenton, Europe and
lifax. He and his family will reside
St Martins, N.B.on their new advent-
e - "retirement".

SPORTS

The Greenwood dental staff hosted the unit golf tournament on 7 September from which the team representing the unit at the CFDS Golf Tournament in Trenton was selected. Retired RCDC and CFDS personnel in the area helped make the event a success. Included in this group were LCol Frank Charman, Maj Bill Crossman, Capt Jack Mullins and Sgt Frank Martell. Once again Jack Mullins provided the committee with a beautiful prize which was won by Cpl Tom Mountain of the Dockyard Clinic.

Capt Doug Spencer and Capt Cliff Murray travelled to Greenwood to take part in the Atlantic Region Tennis Championship Tournament 28-30 August. Capt Spencer displayed fancy footwork and a smooth backhand which enabled him to make it to the semi-finals.

Cpl Allen was recently elected Vice President of the CFB Gagetown Badminton Club.

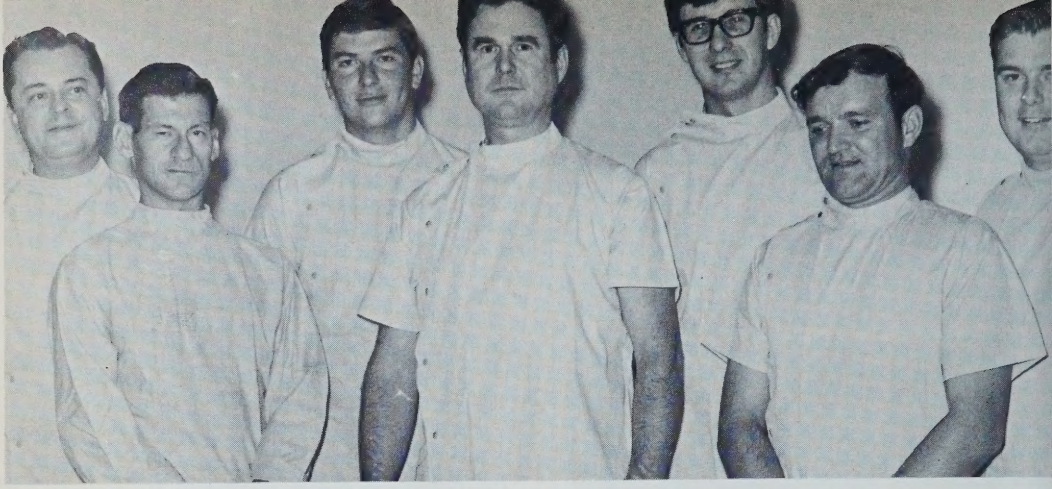
At CFB Cornwallis Sgt Ken McDonald pitched the WOs and Sgts softball team to the Inter-Mess Championship.

13 DENTAL UNIT news

by Lieutenant R.W. Shore

RELEASE

MCpl WR McIntosh, North Bay Detachment, shown below receiving his Certificate of Service from Maj H Griesbach, was released from the Canadian Forces on 2 October. He has accepted a position with a civilian firm in the North Bay area after fourteen years of service.



DON'T FORGET US WAY UP HERE! Members of North Bay Detachment: (left to right) WO J Dion, MCpl JF Butson, Capt MM Kropinak, Maj H Griesbach, Capt RA Hodge, Cpl D Purich, and Sgt P Bosch.

SPORTS

Cpl R Powell, Petawawa Detachment, was awarded an "A" proficiency rating certificate from the CFB Petawawa Ski School for his efforts during the 1972/73 ski season.

A return match of the "Officers versus Other Ranks" golf tournament was held at the CFB Trenton Golf Club on 12 September. The officers thoroughly trounced the other ranks and thus regained their self respect. The winning team was presented with suitable prizes. Thanks are extended to Sgt Jack Schultz for his fine showing. As the celebrations were drawing to a close, Sgt Nelson Highfield was overheard asking Sgt Doug Cormie: "Tell me again about the officer who broke his golf club against a tree..."

MWO VR Kidd presents Lt JW Shore wit the Officers Vs Other Ranks Trophy. Others, left to right, are Maj DG Jone Col WR Thompson, Capt WJ Jury and Capt DK MacKenzie. Capt DB Smith is missin from the photo.

14 DENTAL UNIT news

by Lieutenant P.D. Peterson

PRAIRIE PATTER

On 24 September the detachment at Cold Lake was featured on a television program broadcast from Lloydminster as part of a continuing coverage of activities and facilities at Cold Lake. Our roving reporter has heard the rumour that now our dental personnel, smitten with bright lights and TV cameras, are considering performing in their own "off Broadway" production ... Mrs Sisson, HS PHS 3 at CFB Calgary, holidayed in the UK with a side trip to sunny Spain ... Cpl Hansen, CFB Moose Jaw, travelled to Manitoba t sample the fantastic fishing the Province widely advertises. He returned burdened down with a long line of tale of the ones that got away ... Capt EM Lobb journeyed to Borden to attend the graduation Mess Dinner of the DOTP Can didates, his son having completed Phas II this summer.

POSTED IN

Maj GH Pinsonneault reported for dut at CFB Cold Lake on 9 July on completi of post-graduate training in Orthodont at the University of Toronto. He replaces Maj HJ Marion who is opening an Orthodontic wing at the CFB Petawawa dental detachment.

TURF TURNER TITILLATES TOOTSIES. Major Headley, B Dent O, CFB Calgary, breaks sod for new dental clinic as staff and members of Base CE Section look on. Completion is scheduled for March 1974.

OURNEYDENT ... AND OTHER GOLF

On 20 July CFB Winnipeg hosted its irst golfing "Tourneydent", open to all ea dental personnel and their spouses. layed at the Charleswood Golf Club, the olfing and subsequent dinner and dance ere a huge success. A "Challenge Tro- y" offered by the Selkirk Lines pers- nnel was won by their own team of Capt R Holland, WO D Hughes, Sgt P Fox and pl R Tallack. Other trophies included ow Gross, Mrs Gwen Holland and Sgt Paul ox; Low net, Mrs Audrey Hughes and Cpl Glen Hildebrandt; High Hidden Hole, cs Terry Pierce and Capt Larry Holland; nd the Luckiest Golfer, WO Denny Hughes.

On 14 September the Calgary dental detachment hosted its first golf tournament for Dental personnel stationed in Alberta and former members in the Calgary area. Members of the Cold Lake detachment were despatched with strict orders to bring back at least three prizes. To absolutely no one's surprise, they did just that. Low gross went to Cpl GR Lamontagne, with Capt DR Wright close behind, and the low net was captured by MWO JA Fraser. Maj RH Headley opened the tournament on a very cool day at th Inglewood Golf Club in Calgary. Cpl Rick Portuondo won the trophy for the most honest golfer.

THE GLOATEES. Left to right: MWO Jack Fraser, Capt D Wright, Cpl Gerry Lamontagne, Dr Rich Chergsky, Capt J Steel, Dr Jerry Braunberger, Cpl Rick Portuondo.

15 DENTAL UNIT news

by Lieutenant J.M. Gelinas

UNIT CONFERENCE

A unit conference was held in St Hubert on 13-14 September, providing an opportunity for captains and majors to meet their Career Mangler - Maj Lanctis. Briefings were given in the central laboratory on pitfalls in prosthetic dentistry and in the supply section on equipment maintenance. Eighteen officers attended - count them in the photo on the back cover. The conference concluded with a tournament held at the Chambly Golf Course for those attending and members of 15 Dental Unit in the Montreal-St Jean area. Sgt Matt Hall won low gross and Maj Gerry Bisaillon was runne up.

MWO C TORRENS, MMM

MWO Colleen Torrens was presented wi the Order of Military Merit by Her Majesty the Queen at Government House in Ottawa on 2 August. Colleen was one o 15 chosen from the June 23rd list of t Order of Military Merit to be honoured at the Queen's Investiture. After receiving the awards, the recipients and guests were served refreshments in the Long Gallery where the Queen and the Governor General were in attendance.

TIREMENT LUNCHEON FOR DGDS

Officers from 15 Dental Unit and Mobe Command Headquarters attended a rerement luncheon for BGen Garth C Evans sted by LGen SC Waters, Commander FMC, 4 October in the St Hubert Officers' ss. Musicians of the RCA Band played ring the luncheon, concluding with the ntal Corps March Past and Auld Lang ne.

RAISED TALE

A family of five skunks were discover- under the dental clinic at St Jean d were trapped for the purpose of mak- g pets of them. *(Associate Ed - "Could say, 'A skunk a day will keep patients ay'?" "That stinks" - Ed).*

ORTS

Capt St Louis from La Citadelle and pt Lemieux from Valcartier won the ubles event in the Quebec Regional nnis Tournament held at Longue Pointe -21 September. Capt Lemieux was also nner-up in the Singles competition ... j Jacques and Cpl Frechette were moose nting in the Senneterre area again is year - and again this year there s been no report of success ... MWO lleen Torrens won the Quebec Regional lf Tournament for servicewomen in Valrtier and was a representative in the tional Tournament held at Greenwood . Diane Beauvais, 14, daughter of MWO rcel Beauvais, won the gold medal in velin, bantam division, at the Quebec mmer Games held in Rouyn-Noranda in gust ... Lt Gelinas enjoyed good fishg during the summer at Sept-Isles, rified by the 3-foot long cod he is lding in the photo. *(Lt Gelinas is the middle - Ed.)*

35 FIELD DENTAL UNIT news

by Sergeant B. Hannay

HO HUM ... BACK TO THE FIELD

Once again members of 35 Field Dental Unit provided support to 4 CMBG for the Hohenfels Concentration from 27 August to 22 September. Those members lucky enough to attend were LCol Donely, Capts Gish and Graham, MCpls James and Jones, and Cpl Bowering. For the Reforger Exercise from 6 to 17 October: Maj TC Ringland and Sgt B Hannay got the nod.

SHORT SPURTS SPORTS

The Baden detachment were this year's hosts when 24 members of the unit teed off in our annual golf tournament on 28 June. After only three holes it was obvious the Lahr team composed of Maj Tom Ringland, Sgt Pat Harkin, Sgt Tom Taylor, and MCpl Terry James, was hitting the ball fewer times. Maj Ringland was Low Gross while Maj Brian Yates and Sgt Pat Harkin tied for second.

The winning team: Harkin, Ringland, James and Taylor.

1 DED news

by Lieutenant J.J.L. Lamontagne, CD

VISITS

Maj MB Fisk attended a change of command parade and reception on 12 July when BGen Quinn turned over command of CFB Petawawa to BGen Kirby ,.. BGen Kirby and his Deputy, Col Garlick, visited

personnel and facilities of 1 DED on 18 September.

THIN EDGE OF THE WEDGE

A meeting was held at 1 DED to discuss the forthcoming split in the 724 DEMT trade and its possible career implications. In attendance were LCol Brick and MWOs Adams and Cooper, and MWO Sullivan, from DGDS and DPCOR; Capt Savoie, MWO Bennett, WO Germaine, Sgt Hall and Cpl Nadeau from Montreal; Sgt Schults from Trenton; and all 1 DED personnel.

PERSONAL GLIMPSES

WO J Kennedy visited friends and relatives in Glace Bay N.S. while on leave. He is considering purchasing a small business in that area on retirement from the CF ... Lt JJL Lamontagne is now co-editor of the Petawawa Base Post. His aim is to provide bilingual in-put to the paper.

SPORTS

Sgt PJ Dumas has been busy this summer with his favourite sport - scuba diving. Water accidents in the area kept him busy recovering unfortunate victims. Paul has been taking sailing lessons at the local yacht club and in September represented Base Petawawa at the National Sailing Regatta in Halifax.

Maj Fisk was again a member of the Base ten-man golf team that won the Colonel Stevenson Trophy for the second straight year. Teams from Deep River, Pembroke, Renfrew, Arnprior and Island Brae Golf Clubs competed.

DENTAL SVCS NDHQ news

HEADSHED SHUFFLES

The 1973 summer shuffle has taken place at the Division. The retirement of Col Covey resulted in LCol Brick being designated Director of Treatment Services and LCol Deyette filling the Director of Plans and Requirements position vacated by LCol Brick ... Cpl Rick Pockett has been posted to CFS Alsask and has been replaced by Cpl WB Corrigan in Plans and Requirements ... Col Craigie is now in the Division as Director General (Designate) to replace BGen Evans on his retirement in November.

Col Covey, LCol Brick and Maj Wood attended the annual CFDS golf tourname at Trenton as the DGDS team. Their lo standing in the team position is indic ative that life in the Division is not all golf practice. BGen Evans and Col Craigie also attended the golf tourna ment as inactive combatants.

LCol Brick was selected as a member the rifle team to represent Canada in the International Palma Matches held this year at Camp Perry, Ohio.

RETIREMENT

On 16 August a dinner was held at th Army Officers' Mess in Ottawa to honou Colonel George Ross Covey, MBE, CD, QHDS, DDS, FICD, on his retirement fr the Canadian Forces. The mixed Dinin In was attended by officers and wives from the Division, from dental units, and other friends wishing to honour " Coveys" on their departure from CFDS.

LCol Richardson presented Mrs Covey with a bouquet of red roses while BGe Evans presented Col Covey with a fram CFDS plaque and a water colour.

Col Covey received his DDS from Uni ersity of Toronto in 1941 and has ser continuously with the Canadian Forces since that time. He was Commanding Officer of 25 Field Dental Unit in Ko ea and later also commanded 35 Field Dental Unit in France. He was Comman ant of the Royal Canadian Dental Corp School at Camp Borden immediately pri to his appointment to the Division wh he served as Director of Staffing and Training and most recently as Directo of Treatment Services.

Col Covey now embarks on a new and demanding career as Director of Dental Health Sciences at Algonquin College in Ottawa.

The water colour painted by Jeanine Robertson in 1967 was presented to Col Covey by members of the CFDS. The painting is of a flower girl at Byward Market, Ottawa.

OUR PROOFREADER IS A GRADUATE OF A RECOGNIZED HOUSE OF CORRECTION

Canadian Forces Training

CF DENTAL SERVICES SCHOOL

Dental Clinical Assistant PL3
5 September - 7 November

MCpls RF Buchanan, EW Creelman, Cpls JD Angus, M Brosha, JB Bolduc, J Brisebois, LE Deveaux, MGAC Gemme, DG Hogan, AW Leach, JPHJ Larivee, WL Spencer, V Thompson, MP Vielleux, SH Woiwod, Ptes JGRR Bernier, JO Boulary, HAJ Dijkstra, JM Levesque, JC Poulin, CA Rathbone, JI West, CA Hawkins.

Dental Laboratory Technician PL4
19 September 1973-26 July 1974

MCpls R Claveau, PR Coss, CH Forsythe, H George, WC Spates, GE Sykes, Cpls GC Beaulieu, VE Gorman, GL Payette, L Petkow-Awramow, PJ Searle, LC Street.

CF SCHOOL OF MANAGEMENT

Advanced Management
Maj NH Andrews, Maj H Griesbach

Middle Management
28 August - 21 September
Capt JJ Roy, Capt TA Bradley

CF STAFF COLLEGE

Junior Staff Course, 6 July
Maj RI Stammers

CFB CHILLIWACK

Basic Officers Course
12 September - 13 December
Capt JM Stone

CF SCHOOL OF INSTRUCTIONAL TECHNIQUE

Instructional Technique
13 - 29 August
MWO EE McFadden

LANGUAGE CENTRE, VANCOUVER

French Language Course
24 September - 12 October
LCol AG Taylor

Training with Industry

RITTER COMPANY, ROCHESTER, N.Y.

Ritter Equipment
1 - 5 October
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Major

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Captain

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Corporal

JA Hill, PJ Searle

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CANADIAN FORCES DECORATION

Maj DNH Charles, Sgt PD Whynott, WO JF Giroux, Sgt ME Mahlitz.

Welcome Bienvenue

A cordial welcome to the Canadian Forces Dental Services is extended to: Capt JRRL Trottier, Capt JM Stone, Sgt A Gray, Cpl LE Deveaux, Cpl J Paradis, MCpl CF Bond, Pte PJ Meredith, Miss Pa Horban, Mrs LH Boucher, Mrs J McPherso Mrs JS Benton, Mrs SM Casbolt, Mrs MD Collier.

Au Revoir Farewell

The best of luck to: WO AH Green, Pte Heinrichs, Mrs KA Winkler, Col GR ey, Lt VL Kwasnik, Sgt AW Hussey, WL Wylie, MCpl TJ Cooper, Mrs MA ison, Mrs FL Mitts, Pte DM Brasseur, WR Collier, Capt EG Schroeter, Maj Boucher, MWO JW Hutchinson, WO EA main, Mrs H Daly, Sgt RG Buxton, Sgt Gapmann, Mrs PA Duchene, Mrs IV Oli-, Capt DW Morrow, Capt HW Wilford, DNH Charles, MCpl WR McIntosh, Capt Hatcher, Capt RJ Kokotailo.

Vital Statistics

RRIAGES

Congratulations and many years of ppiness to: Miss Maureen Lunny and Capt GA Ames; Miss CJ Donavan and Mr W Evans; Miss Sheila Waterson and Capt CB Bullock; Miss Yvonne St Pierre and Cpl J Brisebois; Miss Ruth Christensen and Capt RPE Alberni.

BIRTHS

Daughters: Cpl and Mrs DD Tasker, Capt and Mrs CG Milne.

Sons: Capt and Mrs MM Kropinak, Maj and Mrs GR Nye, Capt and Mrs CC Croll, Cpl and Mrs RA Powell, Sgt and Mrs Hope, Mr and Mrs J Armstrong

CONDOLENCES

Deepest sympathy is extended to Mrs Vin Phillips on the loss of her sister; MWO MM Fediuk on the loss of his step-father; and to Mrs F Brown on the loss of her husband.

IT'S NOT SO LONG AGO ... Full marks to everyone who identified BGen BP Kearney (retired), Col JW Turner (retired), and Col SG Bagnall (retired) in this 1969 photograph taken at the opening of the renovated clinic at CFB Cornwallis.

The Superviser

Supervisors are a fortunate lot, for as everyone knows, a supervisor has nothing to do, except

● Decide what is to be done; tell somebody to do it; listen to reasons why it should not be done, why it should be done by somebody else, or why it should be done in a different way; and prepare arguments in rebuttal that will be convincing and conclusive.

● Follow up to see if the thing has been done; discover it has not been done; inquire why it has not been done; listen to excuses from the person who did not do it; and think up arguments to overcome the excuses.

● Follow up for a second time to see if the thing has been done; discover that it has been done incorrectly; point out how it shall be done; conclude that as long as it has been done it might as well be left as it is; wonder if it were not the time to get rid of the person who cannot do a thing correctly; reflect that in all probability any successor would be just as bad or worse.

● Consider how much more simple and better the thing would have been done had he done it himself in the first place; reflect satisfactorily that if he had done it himself he would have been able to do it right in twenty minutes, and that as things turned out, he himself spent two days trying to find out why it was that it had taken somebody else three weeks to do it wrong and to realize that such an idea would have a very demoralizing effect on the organization, because it would strike at the very foundation of the belief of all subordinates that a supervisor has nothing to do.

Extracted from the June 1973
Command Information Letter
by 13 Dental Unit.

For thousands of ears toothache has een a stubborn com- anion of man. The ethods of combat- ng it have changed ith our increasing nowledge of its auses and we can ollow the long road rom primitive meth- ds with the aid of ictorial evidence.

This painting by an Miense Molenaer 1610-1668), a pupil f Franz Hals, shows spruced-up tooth- uller, whose inex- erience is obvious rom his very atti- ude towards the atient,about to ex- ract a tooth. In is right hand the atient clutches a hain, probably one f those worn about he neck as a charm gainst toothache.It eems to have done im little good in his case.

"The Dentist" by erard van Honthorst 1590-1656), a Dutch ainter of the Ut- echt school, known or his artificial ight effects.

Until the begin- ing of the 17th. entury, the only ources of artific- al light for exami- ation and treatment n the night hours ere the torch, the andle, and the oil amp. "The Dentist" s the first repres- ntation we have of ental treatment by andlelight.

Officers attending 15 Unit Officers Conference, St Hubert, 13-14 September. (Left to right) Front row: Maj Nadeau, LCol Begin, Col MacDougall, LCol Turcotte, Maj Gaudet, Maj Jacques. Back row: Capt Maurice, Maj Arpin, Capt Savoie, Capt Ayotte, Capt St Louis, Capt Laberge, Capt Blain, Lt Gelinas.

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CANADIAN FORCES DENTAL SERVICES *Quarterly*

LUME FOURTEEN • NUMBER FOUR • JANUARY 1974 •

The CFDS Quarterly

· VOLUME 14 · NUMBER 4 · JANUARY 1974 ·

Published by authority of Brigadier-General L.G. Craigie, CD, QHDS, DDS, FICD, in April, July, October and January, the Quarterly serves as a means for the exchange of ideas, experiences and information within the Canadian Forces Dental Services. Views and opinions expressed are those of the authors and not necessarily those of the Director General of Dental Services or the Department of National Defence.

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(Left) BGen Evans retires
(Right) BGen Craigie appointed DGDS
(see Pages 12 and 13)

Subscription: $6.00 per year. New subscriptions or renewals, accompanied by cheque or money order made to "The CFDS Quarterly" should be sent to:

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CHANGING THE DENTAL BEHAVIOUR OF THE MILITARY RECRUIT

Lieutenant-Colonel J.F. Begin, CD, DDS, DDPH.

With all the restorative techniques and ethods of prevention now available to the general actitioner most teeth can be saved, which should arantee that our population retain their natural ntition. Unfortunately plaque control, the most actical and beneficial of these methods of evention, depends not so much on the dentist as does on the patient, and probably the most fficult aspect of dental practice is to get the tient involved in his own care.

Plaque control is the patient's responsibility. ne dentist's responsibility is to teach the ethodology of plaque control in such a way that e patient will be motivated to practice it on a ily basis. This article describes how both these sponsibilities can be met through the use of rtain basic principles of education and otivation. It also shows how these principles are ing utilized in the dental program for military cruits at Canadian Forces Base St-Jean, Québec.

The basic principles can be grouped under ur headings:

- CHANGING OR CREATING PERCEPTIONS
- UNDERSTANDING COMMUNICATION
- UTILIZING MOTIVATIONAL FORCES
- FOLLOW-UP FOR REINFORCEMENT AND EVALUATION.

HANGING OR CREATING PERCEPTIONS

Some patients have no apprehension of the ental environment. They are keenly aware of the nportance of maintaining their teeth and are lready doing everything required to attain this oal. *Most patients are doing nothing!*

We must:

- tell the patient about his present condition and how he got that way;
- explain what we can do for him – and what we cannot do;
- make him aware of what he must do for himself and teach him how to do it;
- correct his false perceptions, be they ignorance, past experience or present incorrect ideas about the causes and effect of oral disease; and
- establish clear and realistic goals of performance for the patient, to bring him from a state of ignorance to one in which a good habit has been created. This is accomplished in five steps:

Ignorance – *never heard of bacterial plaque or oral hygiene methods*

↓

Awareness – *shown plaque sites and taught how to remove it*

↓

Interest – *recognizes that he has plaque and can remove it*

↓

Involvement – *decides to control plaque and purchases the required devices*

↓

Action – *brushes and flosses as shown*

↓

Habit – *has been controlling his plaque for at least six months.*

We must also change his thinking about dentists and dentistry. The waiting room and operatory should be cheerful, relaxing and as close to "normal" as possible. Dental personnel should be calm and reassuring. The whole dental atmosphere should be one of relaxed normalcy.

UNDERSTANDING COMMUNICATION:

More important that any techniques - or equipment is the establishment of a human bond – a rapport with the patient. Surely he must accept the dentist before he can accept the message.

Our attitude must be positive, cooperative and concerned, full of encouragement and understanding, confidence and enthusiasm. We know the old methods of communication have failed – where we thought he was hearing what was said and that he understood it.

Patients wish to participate in the planning and treatment and, therefore, we must involve them. They are no longer willing to sit passively while something is being done to them.

An informed patient is more easily motivated.

Patients learn best:

- when they have an understanding of the goals of the training and the behaviour expected;
- when they participate in the learning situation;
- when there is immediate feed-back; and
- when that performance which meets the standard is reinforced.

It is important that we listen to the patient and hear what he has to say.

WHAT IS – his chief complaint?
– his past history?
– his present condition?
– his dental experience?

WHAT DOES – he feel about his mouth?
– he know about disease?
– he hope and desire for the future?

Having opened this bridge to the patient, is more psychologically receptive to what we h to say since he realizes we have his best interest heart and that we really care. The teaching now take place. It is done either by the dentist auxiliaries, singly or in groups. Making use of gr dynamics can also be a valuable learn experience.

When instructing the patient:

- be careful not to lose him – stop and questions;
- use language that he can understand;
- keep the presentation orderly, simple short; and
- concentrate on areas that pertain to problems.

UTILIZING MOTIVATIONAL FORCES:

The cause-effect relation between neglect and disease is not apparent to m patients. It is difficult to have people do someth now in order to ensure that some ill-defined eff does not happen in 10 to 20 years. We must m the relation more immediate.

Most people are not motivated by logical rational health considerations, but for soc emotional and psychological reasons. We m understand and apply the motivational cycle to message.

There is great variety in the needs motivation of individuals. We must determine w factors are of importance to each patient and t relate our teaching to his specific needs motivational factors.

For example, what brought him to office?

pain?
function?
aesthetics?
approval of self?
family pressure?
status?
fear?
phonetics?
halitosis?
social pressure?

Often we have to create a need or anxi within the patient. But we must sell this need other than mere health reasons. The patient m

"influenced" and left to make his own decision, his own reasons. We can only plant the seed.

A person will not take action unless:

health matters are important to him;	• *we must convince him that they are;*
he believes himself susceptible to a certain disease with serious consequences to him;	• *we must show him decay and periodontitis;*
the threat is moderately intense;	• *we must indicate the eventual loss of teeth and also the threat of gingivitis and halitosis now;*
he believes means exist and are available for him to take action;	• *we must introduce him to plaque control and regular care;*
some cue occurs to trigger a response;	• *we must institute a recall system and relieve any pain or anxiety.*

INFORCEMENT AND EVALUATION

A visit to the dental office every two or three irs is insufficient contact to influence a patient a meaningful way. Initially the patient must be n a few times over a period of weeks or months permit a reinforcement of the plaque control hniques based on an evaluation of the rate of cess in plaque removal. A plaque index can be d for comparison.

At no time should the patient be humiliated, ached to, downgraded or scolded. The attitude ist be positive. Remember that habit comes not m mere repetition but by the degree of success ained.

We must:

- correct his faults;
- bring his performance up to standard;
- identify difficulties;
- use plenty of encouragement.

Activities which lead to success and feelings self-esteem will be repeated whereas activities ich lead to failure and humiliation will be oided.

APPLICATION OF THESE PRINCIPLES TO THE MILITARY RECRUIT

The new recruit usually presents himself with poor oral hygiene, ignorance of what is going on in his mouth and a history of dental neglect. The first week on base he is undergoing a significant transition in his life, giving up the old and putting on a new way of life. He is psychologically receptive to discipline, authority, new knowledge and ideas and an accepted way of life. Therefore the dental contact is made during the first week and is continued all during his initial phase of training.

On Tuesday of his first week of training he receives a general lecture by a dental officer who explains:

- what the dental services can and will do for him;
- what is happening in his mouth;
- the basic etiology of decay and gingivitis; and
- plaque control measures.

A brush-in exercise is then conducted using a dye tablet, mirrors, brushing and flossing to remove as much plaque as possible. This exercise is supervised by a team of auxiliaries.

On Wednesday the recruit has an orthopantomograph taken. He is dentally examined and charted by a dental officer who evaluates his plaque control from the previous day and takes him to the sink for reinforcement and encouragement of his effort. A surgery parade is held later that day to remove unsalvageable teeth.

On Friday the surgery parade continues and two therapists administer Cavitron scaling to the largest number possible. They also give a third reinforcement and evaluation of plaque control abilities. Future treatment is partly conditional on a patient's efforts in plaque control.

The recruit is seen again three months later as he begins his language training. During this phase of training he receives treatment in all disciplines of dentistry. The goal of the Canadian Forces Dental Services is to make all recruits and military personnel dentally fit and to keep them fit. They are all recalled annually for both Phase I preventive care and Phase II restorative care as required. Throughout his career but especially during basic training, the serviceman's treatment plan and personal care is related to:

– his sense of pride and self-respect;

– his desire to have others respect him;

– his sense of responsibility and new found maturity;

– his pride in personal appearance and cleanliness.

He is given a special plaque control kit which he is told will help:

– prevent disease;

– improve appearance;

– eliminate bad breath;

– produce white teeth;

– make him feel better; and

– prepare his mouth for better restoratio

At no time must the dental officer all himself to become discouraged with the failures has been shown that some patients learn fas than others and are more easily convinced. If are to have a military force which is ready to se on a moment's notice in any danger spot in world, military personnel must be both medica and dentally fit. We in the dental services f considerable progress has been made over the p five years. Much of the success is due to patient's daily, personal involvement in his o care.

References

Obtainable from the author.

Report of a Case

OSTEOMYELITIS

Captain P. D. Higgins, DDS

History

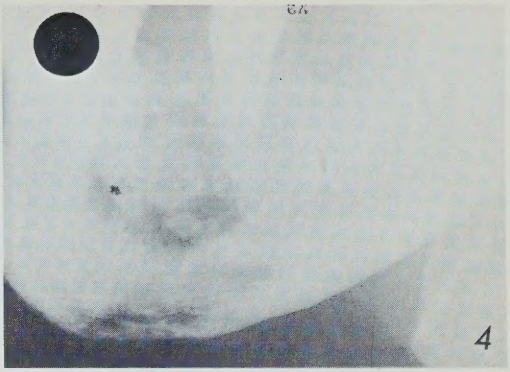
A young, healthy, caucasian male presented himself complaining of pain in the area of the lower left first biscuspid. The tooth did not respond to vitality tests and a radiograph disclosed a small periapical radiolucency. An attempt at endodontic therapy failed when the canal could not be completely negotiated, and the tooth was subsequently extracted.

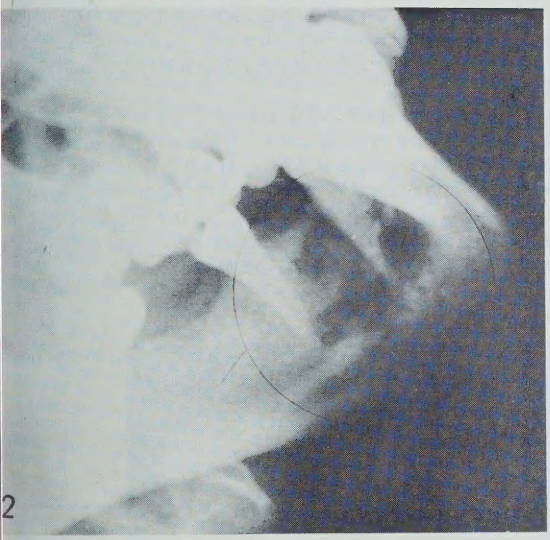
Twenty-four hours later the patient left for an exercise in Norway where, two days after arrival in the field, he reported to a medical officer with acute pain in the area of the socket. He was administered PEN V 250 mg q.i.d. for three days until he could be seen by a dental officer. By that time the pain had diminished considerably and the extraction site appeared to be healing well. Because a "dry socket" was the suspected cause of the problem and the penicillin appeared to have been effective, the socket was not packed and patient was advised to return if pain recurred. did so 20 days later, complaining of renewed p of somewhat less intensity than he had experien before. The patient also reported he was feeling well and suffered loss of appetite.

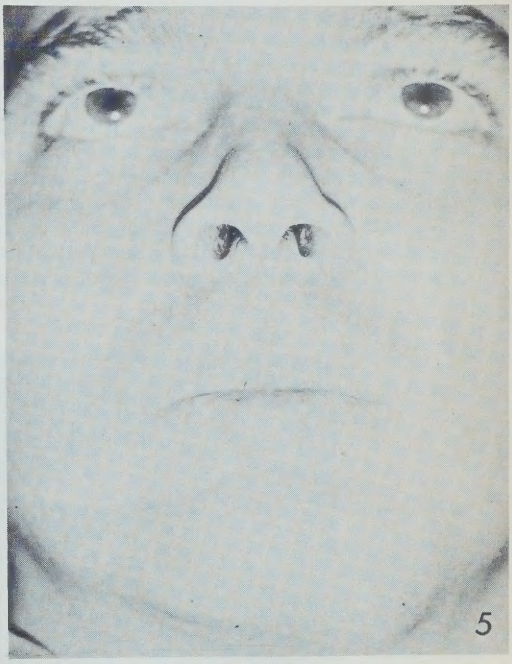
The intra-oral tissues appeared normal w almost complete healing of the extraction site, there was a hard swelling along the lower border of the mandible. Facilities for X-ray w not available in the field and, as he was returr to Canada the following day, arrangements w made to conduct a radiographic examination at home clinic. The significant evidence provided this survey is shown in Figures 1 to 5.

Hospital Findings

The physical examination, functic







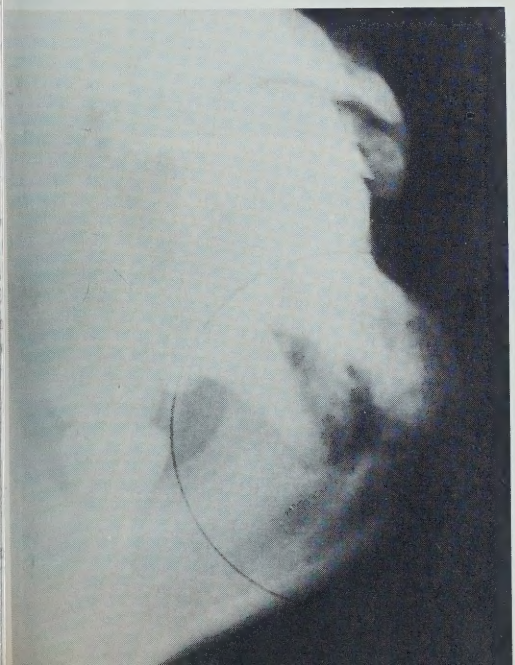


Fig. 1. This periapical film shows loss of definition of the cancellous bone in the area of the extracted biscupid.

Fig. 2. and 3. These films reveal a frank ragged destruction of the cancellous bone from mid-line to area of left second biscuspid, extending down to and including the cortical plate of the lower border.

Fig. 4. The formation of what appears to be subperiosteal new bone along the lower border is readily visible. An area which could be sequestered bone is also apparent but additional radiographs tended to negate this possibility.

Fig. 5. A photograph of the patient showing external swelling along the lower left mandible.

enquiry, and his personal and family history revealed no abnormalities. A radiograph of the chest was clear and cultures of his urine and blood produced no bacterial growth after 48 hrs incubation and 14 days incubation respectively. The R.B.C., W.B.C., and platelet count were normal but the sedimentation rate was accelerated.

Differential Diagnosis

The condition was tentatively diagnosed as osteomyelitis with the possibility it might be a malignant neoplasm (primary or secondary).

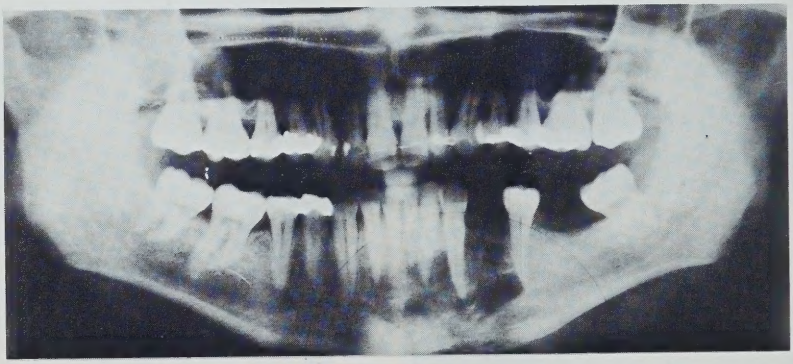
Treatment

The patient was admitted to the National Defence Medical Centre, where further radiographic evidence, personal history, physical examination and blood tests tended to confirm the diagnosis of osteomyelitis. The medication prescribed was 4 gms of erythromycin a day for ten days, after which time the patient was discharged, with instructions to return at regular intervals for observation. After the initial ten days the dosage of antiobiotics was reduced to 250 mg q.i.d. for a further two weeks, and was then discontinued.

Sequella

Two weeks after being admitted to hospital the bulge on the lower border of the mandible had decreased considerably and the symptoms had subsided almost completely, which response ruled out the possibility of a neoplasm. A week later there was radiographic evidence that the infection had been resolved and healing was well established (Fig. 6). Vitality tests indicated that the lateral incisor on the left side was non-vital. All other teeth in the affected area responded normally.

A final examination, seven weeks after treatment was initiated, revealed that healing was still proceeding normally (Fig. 7), and vitality tests were consistent with the previous findings. The patient was referred back to the dental clinic for routine operative treatment, including endodontic therapy on the lateral incisor.



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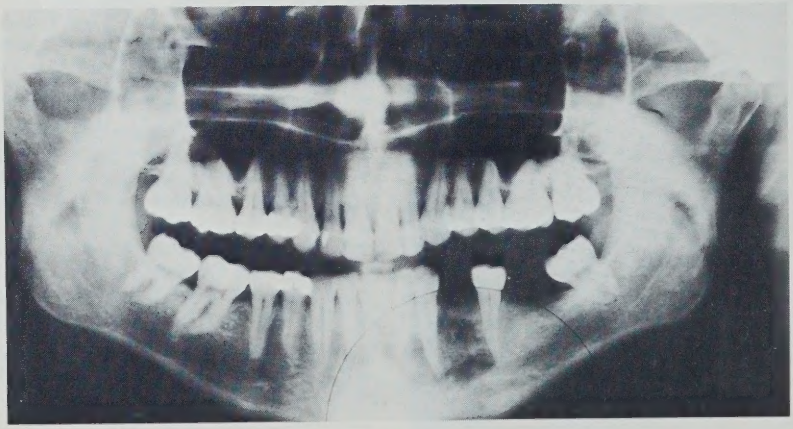

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Discussion

The chain of events leading up to the patient's hospitalization is consistent with that cited by Shafer-Hine-Levy: "A periapical infection (usually an abcess), if it is a particularly virulent one and not walled off, may undergo an acute exacerbation, especially if the area is traumatized or surgically disturbed without establishing and maintaining drainage."[1] The condition was aggravated by the fact that the patient, a member of the Military Police, worked 12 to 18 hour shifts under unfavourable field conditions, slept very little, and ate poorly and irregularly.

The infection did not produce the severe symptoms commonly associated with acute osteomyelitis. The pain was mild, there was little elevation of temperature and the teeth in the area were not particularly mobile and only slightly uncomfortable in mastication.

It is interesting to note that the infection responded well to a conservative, non-surgical approach even though the area involved was quite extensive and had crossed the midline of the mandible.[2]

With regard to the blood picture, the sedimentation rate was accelerated, which is a frequent finding in cases of osteomyelitis,[3] whereas the W.B.C. count was normal. Since the W.B.C. count is often elevated in acute osteomyelitis but not in the sub-acute or chronic forms, it is conceivable that the infection developed without passing through an acute stage. There is also the possibility that the dosage of PEN V administered in the field could have lowered the profile of the infection from acute to chronic. In any event, it is important to remember that even the simplest dental extractions can be followed by severe complications, which must be diagnosed accurately and treated immediately.

Acknowledgements

I wish to extend my thanks to Lieutenant-Colonel J.V.P. Chatwin and Major G.R. Nye for their time and effort in the preparation of photo-radiographs and relevant information used in this report.

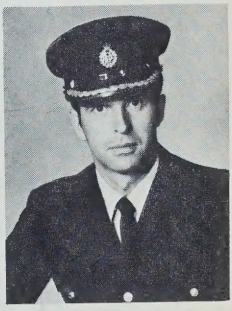
References

1. Shafer, W.G. Hine, M.K., and Levy, B.M. *A textbook of oral pathology 2nd ed.* Philadelphia, Saunders, 1963, p. 392.
2. Roane, J.B., and Marshall, F.J. *Osteomyelitis: a complication of pulpless teeth. Report of a case.* Oral Surg. 34: 257-61, Aug 72.
3. Wells, B.B. *Clinical pathology. 2nd ed.* Philadelphia, Saunders, pp. 15-17.

Report of a Case

Horizontal Mandibular Cuspid Impaction and Contralateral Compound Composite Odontoma

Major E.L. MacInnis, DDS.



The incidence of horizontally impacted mandibular cuspids is relatively low compared to that of many other teeth.[1,2] Although they occasionally elicit acute or chronic symptoms, such impactions are usually discovered by radiographic examination.

The compound composite odontoma is a growth or tumor of odontogenic origin[3] and contains multiple rudimentary tooth-like forms, with varying morphologic configurations. The individual units are generally united by fibrous connective tissue with the entire tumor enclosed in a connective tissue capsule.[4] The etiology is unknown.[5] Commonly associated with unerupted teeth, these tumors occur without predilection for a particular site, and may be found in any age group. Clinically, odontomas are generally asymptomatic unless an associated dentigerous cyst has caused bony expansion. They are usually first

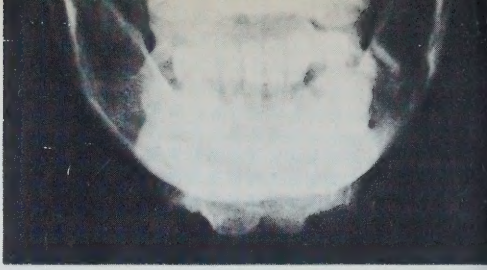
identified through routine radiographic examination.

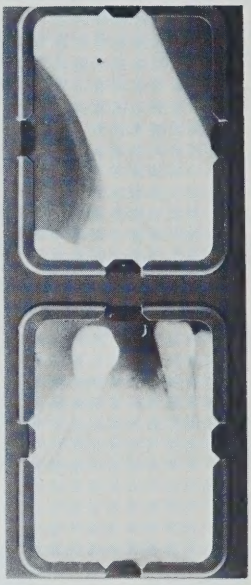
The recommended treatment for both the impacted cuspid and the odontoma is conservative surgical excision. [6,7].

Many instances of bilateral impacted cuspids have been documented,[8] but this report describes a relatively unusual combination in which there is an impacted cuspid on one side of the arch and an odontoma in the general area of the missing cuspid on the other side.

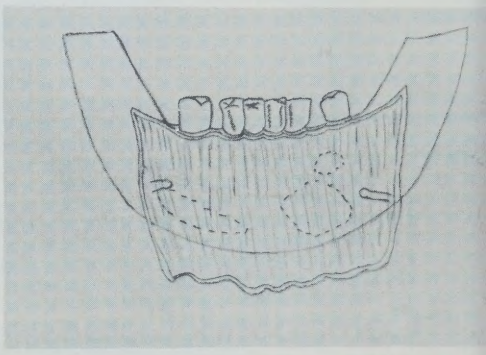
Case Report

A twenty-three year old woman was referred for surgical consultation prior to construction of prosthetic appliances. She was edentulous in the maxilla and the cuspid, second bicuspid and all molars were missing from both sides of the mandible. A series of intra and extra-oral radiographs revealed that she had an impacted lower right cuspid and a large, well-demarcated radiopaque mass in the cuspid area on the left side (Figs. 1 and 2).



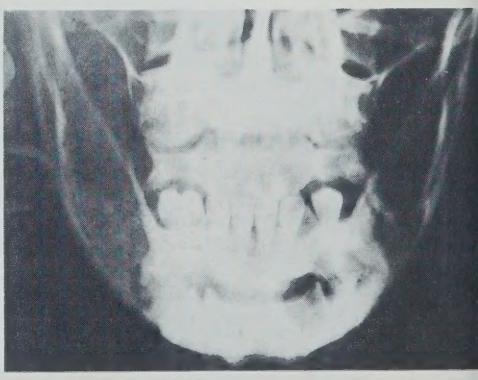


The patient was admitted to hospital and, under nasoendotracheal anaesthesia, the operative sites were exposed by a large, modified, degloving incision (Fig. 3). The inferior border of the mandible and the mental neurovascular bundles were identified.



On the right side, intimate and inferior to the mental foramen, a bony bulge was observed. The buccal cortical bone was removed, exposing the crown of the tooth which appeared to be in intimate contact with the inferior alveolar and mental neurovascular bundles. The tooth was sectioned and the crown and root were delivered. The mental bundle was traumatized by the force of retraction during this procedure.

On the left side, forty-four miniature, relatively well-developed teeth were contained in the encapsulated tumor which was removed from the cuspid area. The tumor was diagnosed as being a compound composite odontoma.



The surgical areas were debrided, the mucoperiosteal flaps closed with .000 silk sutures and a pressure bandage applied around the chin.

Some pain and swelling were experienced for three days and the bandage was taken off and the patient discharged on the fourth post-operative day. The sutures were removed and X-rays taken three days later (Fig. 4), at which time the pain

id swelling had disappeared and the operative site as healing well. There was, however, paraesthesia the right lip to the midline.

iscussion

There is a consensus of opinion that ıpacted teeth and odontogenic tumors should be moved prior to placement of a prosthesis in the ea.[9] The degloving method employed in this stance to expose the operative sites is one which used by the US Army General hospital in andstuhl, Germany, and elsewhere.[10] It provides cellent access to the anterior and inferior border the mandible.

The paraesthesia which the patient experienced was still present one month post-operatively, which emphasizes the fact that excessive force of retraction must be avoided in all surgical procedures to prevent damage to important structures.

Summary

An unusual combination of horizontal mandibular cuspid impaction and contralateral compound composite odontoma has been reported, including the surgical management and sequillae of the case.

eferences

Wechsler, W.H. *An unusual cuspid impaction: Report case.* Canad. Dent. A.J. **39**: 35-46, Jan. 1973.

Archer, W.H. *Oral surgery; a step-by-step atlas of erative techniques. 4th ed.* Philadelphia, Saunders, 1966. 123.

Shafer, W.G., Hine, M.K., and Levy, B.M. *A textbook oral pathology. 2nd ed.* Philadelphia, Saunders, 1963. 229.

Ibid p.232.

5. Ibid p.230.
6. Ibid p.232.
7. Archer, W.H. *Oral surgery; a step-by-step atlas of operative techniques. 4th ed.* Philadelphia, Saunders, 1966 p.531.
8. Ibid p.202.
9. Ibid p.230.
10. Bond, W.R., Col DC USA, Pers comm.

ROYAL CANADIAN DENTAL CORPS ASSOCIATION

It has been several years since the Royal Canadian ental Corps Association was last featured in the Quarterly. nticipated resurgence of the Dental Militia makes timely ıe following report from the Association, which has ways played a vital role, through good times and bad, in romoting the activity of the Militia component of the ental Services.

... Editor

* * * *

The Annual Meeting of the R.C.D.C. ssociation was held at the CFDS School, CFB orden on 26 October, 1973. On opening the neeting the President, LCol P.L. Rondeau, asked nembers to observe one minute of silence in nemory of LCol J.E. Hallett, who had passed away ince the last meeting.

Roll Call was answered by:
Hon. President – LCol M.J. Snidal, Winnipeg
Past President – Maj C.G. Hunt, Toronto
President – LCol P.L. Rondeau, Vancouver
President Elect – LCol M.C. Parks, St. Catherines
2nd Vice President – LCol H.G. Bonnell, St. John
Secretary – Capt J. Thomas, Ottawa
Treasurer – LCol T.W. LeSage, Ottawa
Delegates to C.D.A. – LCol W.C. Waid, Ottawa
Col I.A.L. Millar, Ottawa
Members – LCol W.G. Campbell, Winnipeg
LCol A.Z. Henry, Toronto
Maj K.C. Chisholm, Vancouver
LCol J.D. McLean, Windsor.

LCol Rondeau then introduced Col L.A. Richardson, Commandant of the CFDS School. After a brief speech of welcome, Col Richardson was faced with a barrage of questions regarding training at the School. Members are indebted to Col Richardson and his staff for the many courtesies extended during the meeting.

CFDSS HOSTS RCDC ASSOCIATION. (Left to right) Front row: Col L.A. Richardson, Commandant CFDSS; Capt J. Thomas, Secretary RCDCA; Maj C.G. Hunt, retired; LCol P. Rondeau, President; LCol M.C. Parks, retired; LCol T.W. Lesage, Cdn Forces (Militia); Col G. MacDougall, CO 15 Dental Unit (representing DGDS). Rear row: LCol J.D. MacLean, retired; LCol W. Waid, DVA dentist at NDMC; LCol M.J. Snidal, on staff University of Manitoba; Col I.A.L. Miller, a former Commandant of CFDSS; LCol A.Z. Henry, retired; LCol H.G. Bonnell, retired; LCol W.G. Campbell, retired; Maj G. Chisholm, Cdn Forces (Militia).

In presenting the President's report, LCol Rondeau began by quoting the objects of the R.C.D.C. Association:

> *"The objects of the R.C.D.C.A. are to promote the efficiency and the esprit-de-corps of the Royal Canadian Dental Corps (Canadian Forces Dental Services) and to cooperate with fellow members of the Canadian Defence Association in the promotion of general efficiency of Canadian Defence Forces".*

He went on to stress the elements of change with which we are all faced to-day, and he reminded members of the series of events which have transpired since the formation of the Association in 1947.

Apologies for non-attendance at the meeting were received from: Brig K.M. Baird, BGen Garth C. Evans, Col L.G. Craigie, Col J. Merritt, Col C.E. Woods.

A letter was read from Mrs. Elgin Wansbrough thanking the Association for their part in providing a plaque in memory of the late Brig Wansbrough. This plaque now adorns the entrance to the Wansbrough Building.

LCol W.C. Waid reported on the 19 meeting of the Conference of Defen Associations, at which he and Col I.A.L. Mil were our delegates.

Col George MacDougall, Commandi Officer of 15 Dental Unit, representing t D.G.D.S., addressed the meeting. He stressed t vital need for a strong Reserve Force. summarized the functions and the commitments Mobile Command and showed how a strong Mili was required to aid in its tasks. Speaki specifically about the Dental Militia, C MacDougall observed that the prese establishment was barely enough to maintain Dental Reserve presence. He went on to outlin proposed reorganization of the Dental Milit which would be necessary to carry out its role a to provide training programs.

Delegates from across Canada gave reports activities in their areas. These were mainly o negative nature, which was in keeping with C MacDougall's summation of the present position the Dental Militia.

The following were elected Honorary Life ?mbers of the R.C.D.C. Association: Brig Gen irth C. Evans, Col J.E. Merritt, LCol W.G. mpbell, LCol A.Z. Henry.

Invited to become Life Members of the C.D.C.A. were: LCol P.L. Rondeau, LCol W.C. aid, LCol J.D. McLean, LCol H.F. Bonnell.

The Edgecombe Trophy was presented to ipt J. Thomas by LCol P.L. Rondeau.

The following resolution was submitted and cepted for presentation at the 1974 meeting of e Conference of Defence Associations:

"Whereas Primary Reserves are tasked to provide trained individuals to augment the Regular Force," and

"Whereas in the event of the Regular Force being committed to one or more of its assigned tasks," and "Whereas it is evident that the Royal Canadian Dental Corps Reserve is totally inadequate to fulfil its role in augmenting the Regular Force,"

NOW THEREFORE BE IT RESOLVED THAT:

"A new organization of dental components should be established."

This resolution will also fulfil the requirements in C.D.A. Resolution No. 27/73. (A similar resolution previously submitted).

The following officers were elected for 1974:

Honorary Presidents – LCol W.C. Waid
Maj C.G. Hunt
Past President – LCol P.L. Rondeau
President – LCol M.C. Parks
President Elect – LCol H.F. Bonnell
1st Vice President – LCol J.D. McLean
2nd. Vice President – Maj G. Chisholm
Secretary – Capt J. Thomas
Treasurer – LCol T.W. LeSage
Delegates to CDA – Col I.A.L. Millar
Maj K.G. Chisholm
Alternates – LCol W.C. Waid
Col W.E. Meldrum

During the Annual Mess Dinner, which was held at the Waterloo Mess, Life Membership certificates were presented to: LCol T.W. LeSage, LCol A. Mintz, LCol M.J. Snidal.

At the conclusion of the meeting, members made a donation to the School's Adopted Child Fund.

BGEN EVANS RETIRES

Deserving tribute was paid to Brigadier-General Garth Cameron Evans, CD, QHDS, DDS, FICD when, on 30 October, over 80 persons gathered at the CFB Ottawa (North) Officers' Mess to attend a dinner in his honour on the eve of his retirement as Director General of Dental Services for the Canadian Forces.

In recounting the highlights of a long, distinguished career, BGen LG Craigie cited BGen Evans' tours in Korea and aboard HMCS Ontario, his long association with the School as clinician, teacher and chief instructor, his service as commanding officer of 4 Field and 11 Dental Units and his last three years as DGDS.

The theme of BGen Evans "rebuttal" was gratitude for what he termed "luck" throughout his career in the assignment of duties and in the wise counsel and abundant support he received from his commanding officers. He cited as well the cooperation and good fellowship he derived from his association with his fellow officers and all who served under his command.

Presentations from all personnel of the CFDS included a quantity of crystal and a formal portrait which will become part of the DGDS gallery at the CFDSS in CFB Borden.

The formal part of the dinner was concluded when a bouquet of red roses was presented to Mrs Sylvia Evans by LCol JW Fletcher.

Among those attended the dinner were BGen and Mrs Evans' son Michael and his wife; BGen FR Cullen, Commandant NDMC; LCol Phil Labelle, DPRC; and many former members of the Dental Services including BGen and Mrs Bert Kearney; Col and Mrs Liv Millar; Col Gord Shillington; Col and Mrs Bill Meldrum; Col and Mrs Jay Turner; Maj and Mrs Charles Sivell; Maj and Mrs Chuck Casterton; and Dr and Mrs Don McPhee.

Top: BGens Craigie and Evans with formal portrait.

Centre: Mrs Evans with roses from LCol Fletcher.

Bottom: BGen Craigie, Mrs Evans, Mrs Craigie, and BGen Evans.

BGEN CRAIGIE APPOINTED DGDS

The highest position in the CFDS was conferred on Brigadier-General Lawrence Glenn Craigie, CD, QHDS, DDS, FICD, who assumed his new duties as Director General of Dental Services in November, at which time he was promoted to his present rank.

As the fifth officer to bear the rank and title since the Second World War, BGen Craigie brings to the position of DGDS **a wealth of talent and experience.**

His origins in Kamsack Saskatchewan are proudly attested to by BGen Craigie and, although he received his Doctorate at the University of Toronto and has spent most of his career elsewhere, he remains a Westerner at heart.

BGen Craigie's previous postings include service as commanding officer of 35 Field Dental Unit, various positions at NDHQ including that of Deputy Director General of Dental Services, and most recently, as Commandant of the CFDSS.

His incisive appreciation of and concern for all facets of the Dental Services, and his dedication to the welfare and career progression of its members are abundantly evident. Under BGen Craigie's leadership we are assured of significant growth in the contributions the CFDS makes to those we serve. We anticipate a concomitant increase in our pride and sense of accomplishment.

QUEEN'S HONOURS

Her Majesty Queen Elizabeth II recently conferred appointments as Queen's Honorary Dental Surgeons on BGen LG Craigie, DGDS; Col WR Thompson, CO 13 Dental Unit; Col LR Pierce, CO 14 Dental Unit; and Col G MacDougall, CO 15 Dental Unit.

These appointments stem from similar ones made to physicians and surgeons of the British Army since 1858. They form a means by which meritorious service by officers of both the Regular and Reserve components of the CFDS can be suitably recognized. They were first awarded in Canada to the late Brigadier EM Wansbrough and Colonel JF Edgecombe.

MUSIC TO OUR EARS

Authority was recently granted for the adoption of the *"MARCH PAST OF THE ROYAL CANADIAN DENTAL CORPS"* as the official march of the Canadian Forces Dental Services.

ANNUAL DGDS CONFERENCE

Dental unit commanders gathered in Ottawa from 29 to 31 October for the 21st annual DGDS unit commanders conference.

During the opening address, BGen GC Evans stated that in view of his imminent retirement he had decided that BGen LG Craigie, the DGDS (Designate), would assume responsibility for the conduct of the meeting. BGen Craigie then set the keynote by stressing the need for full and active participation on the part of all delegates.

Under the chairmanship of LCol JC Brick a most spirited series of presentations and discussions ensued. Topics of vital importance to the Dental Services were freely debated and decisions made. It early became evident that certain topics required further in-depth study and the next conference was put forward to May 1974.

The consensus of feeling was that a firm list of priorities had been established, and that continuous and vigorous investigations of long-standing problems would evolve from this meeting. In this regard, it is perhaps significant that the minutes of the conference were

transcribed, compiled and distributed with unusual rapidity.

In addition to the officers portrayed in the official photograph, unit administrative officers and various career managers were present during selected portions of the conference.

ANNUAL CONFERENCE. *(Left to right) Seated:* Col G MacDougall, CO 15 Dental Unit, Montreal; Col WR Thompson, CO 13 Dental Unit, Trenton; BGen GC Evans, DGDS; LGen WA Milroy, ADM (Per), NDHQ; BGen LG Craigie, DGDS (Designate); Col LR Pierce, CO 14 Dental Unit, Winnipeg. *Standing:* Col LA Richardson, Commandant CFDSS, Borden; LCol JJN Wright, BDentO, CFB Cold Lake; LCol JW Fletcher, DGDS/DDPR-2; LCol JMA Donely, CO 35 Field Dental Unit, Cdn Forces Europe; Maj VJ Lanctis, DPCO/Dent,NDHQ; LCol JVP Chatwin, CO 1 Dental Unit, Ottawa; Maj RG Peebles, Sec DGDS, NDHQ; Col DH Protheroe, CO 12 Dental Unit, Halifax; Maj MB Fisk, CO 1 Dental Equipment Depot, Petawawa; LCol AG Taylor, CO 11 Dental Unit, Esquimalt; LCol DH Hillier, DGDS/DDTS-2, NDHQ; Maj HS Wood, DGDS/DDTS-3, NDHQ; LCol MN Deyette, DGDS/DDPR, NDHQ; LCol JC Brick, DGDS/DDTS, NDHQ.

C.F. DENTAL SERVICES SCHOOL NEWS

by Chief Warrant Officer W.D. Morris, CD

TEMPORARY DUTY

Col LA Richardson, Commandant CFDSS, attended the Canadian Academy of Prosthodontics meeting 13-14 October, and was elected to the Executive ... Col Richardson, LCol PR McQueen and Capt JR Salois attended the CDA Convention in Vancouver 15-17 October ... LCol LA Reynolds and Capt KR Morley attended the Periodontics Association Convention at Houston Texas from 26 to 29 October ... Capt FJ Marentette, about to attend the DGDS Conference, had a sudden change of plans when he was alerted for UN duty. After the needles had been administered, everything got back to normal - stand down from the alert and carry on as usual! A late report, however, indicate he is off to the Middle East in February

LCol Brudvik, Col Richardson and Col Lane

VISITS

Col James Lane, Chief of Periodontics, Brooke Army Medical Center, and LCol J Brudvik, Director of Dental Education, US Army Academy of Health Sciences - both stationed at Fort Sam Houston, Texas - were welcomed to CFDSS on 6 November. During their two-day visit, they examined the trades training system used at the School.

On 7 November the Durham Ontario Dental Society attended an Academy Day at the School which included a tour of the trades training facilities. Members of the Society and the two visitors from Fort Sam Houston attended a Mess dinner in the evening.

The Diploma Dental Public Health class of the University of Toronto visited on 16 November. Professor RL Ellis, the Course Director, accompanied the students: Dr K Ambozaitis, Dr J Ty, Dr H Weld (from Canada), Dr L Chen and Dr C Sung (from Taiwan), and Dr E deGalvon and Dr L Montes (from Mexico). The visit included a tour of the School with presentations from each of the dental trades and a look at the Preventive Dentistry Program. The day was concluded with a TGIF at the Officers' Mess.

DENTAL HYGIENE QUALIFICATION

CWO JH Sadler is the first serving member who, as a wholly CFDS trained Therapist, has passed the Ontario qualifying examinations for dental hygiene. Our congratulations to Jack on his registration by the Royal College of Dental Surgeons of Ontario and receipt of his licence to practice Dental Hygiene in that province.

WHAT DID HE WHISPER IN SANTA'S EAR???

That was the question when, at the CFDSS Christmas party, Col Richardson took his turn on Santa's knee. It was a good party and bouquets go to the organizers: Sgt Keith Delmage, Sgt Jim Busse and Cpl Irving Winsor.

1 DENTAL UNIT NEWS

by Sergeant MY Fletcher, CD

CONVENTIONS

LCol Chatwin attended the Board of Governors and the Canadian Dental Association Convention in Vancouver, 10-17 October. He was elected president of the Canadian Society of Public Health Dentistry for 1973/74 ... Mrs Trudy McNamee once again represented the ODNAA at the CDA Convention. Although Trudy's table clinic did not take first prize this year, it did receive much attention ... Capt Dave Rowat attended the "Fall Clinic" held in Montreal.

DUTY TRIPS

LCol Deyette and Sgt Muriel Fletcher recently spent two weeks providing dental treatment for Canadian Embassy personnel in Moscow.

PUBLIC RELATIONS

A dental education day was held at CFB Ottawa (North) for junior school students. A team composed of Capt Cherun, Sgt Muriel Fletcher, Cpl Diane Nolet, and Pte Dawn Young discussed diet, fluoride brush-in, and flossing with 650 students.

SOCIAL EVENTS

The arrival of the Christmas season brought with it the usual number of parties. CFB Ottawa (South) hosted area clinics at a Wine & Cheese Party. Maj Marcil entertained NDHQ clinic personnel at his home. LCol Chatwin held a cocktail party for 1 Dental Unit and DGDS personnel. The annual unit Christmas party was held at the Uplands Golf Club,

1 DENTAL UNIT SENIOR NCOs HELD A LUNCHEON ON 23 OCTOBER TO SAY FAREWELL TO BGEN EVANS ON HIS RETIREMENT. *(Left to right) Seated:* WO JA Patterson, MWO RK Jones, LCol JVP Chatwin, BGen Garth C Evans, MWO EE McFadden, Sgt MY Fletcher. *Standing:* Sgt EA Snippa, Sgt DJ Mullins, Sgt RC Wormington, WO HC King, MWO TW Sullivan, Sgt RJ Trembley, WO MA James, Sgt SJ Kirley, MWO WA Bennett, MWO KJ Smallshaw, WO EA Duve, Sgt H Marckwort, WO GR Jennings, MWO C Adams.

and featured a live band, with some 70 dental members, past and present, attending.

Maj Yvon Cyrenne was a recent graduate at ceremonies held at the Holiday Inn on 18 December to honour those who had successfully completed the Dale Carnegie course on *Effective Speaking and Public Relations*.

LAST SEEN PURSUING PLEASURE

Capt and Mrs Bowes are at present vacationing in India ... Sgt Muriel Fletcher and husband John were recently detailed to accompany 412 Sqn on a training flight which included stop-overs in Puerto Rico, Kingston Jamaica, and Mexico City.

SPORTS

The first bonspiel of the year was held 2 November at CFB Ottawa (South). CFB Petawawa was unable to attend as, at the last minute, they were put on standby for duty in the Middle East. With no competition, the winner was - you guessed it - MWO Tommy Sullivan and team.

11 DENTAL UNIT NEWS

by Sergeant R.W. Boyd, CD

HEADQUARTERS

At long last the headquarters staff have moved into their new offices and, after a few minor adjustments and additions, are quite proud of their surroundings.

RENOVATIONS

Renovations are under way at the Comox clinic to facilitate a hygienists bay, storage area, a larger lab and a larger orderly room ... Baldy Hughes clinic has been moved and enlarged to accomodate the mobile equipment as well as the standard dental unit ... The Naden clinic has had some minor facelifting and now boasts a sterilization room and a larger Ceramco lab ... plans are being evolved to construct a new hospital and dental complex at Holberg. The plans are somewhat unique in that it is proposed to construct the dental facilities first and add the hospital at a later date.

VISITS

MWO Mazerall stopped off at Chilliwack to say hello on his way to reside in Abbotsford ... Col Hap Protheroe was a brief visitor on 10 October when he

Cpl Dawn Duncan receives her Canadian Dental Nurses and Assistants Association Certificate from BGen Craigie.

dropped in on his old command ... BGen Craigie joined the officers of the Victoria area for lunch at Royal Roads in December while on leave ... Ex-Sgt Looker looked in on the Chilliwack clinic in December to say farewell. Brian was in the process of moving his family to Prince George where he's bought a house.

SPORTS

Maj Graham won the 2nd event in the Chilliwack opening bonspiel ... Capts Hansen and Fennell returned from a deer hunting expedition to Holberg and reported good luck ... Word is out that another cross-Canada run will be on for this year.

12 DENTAL UNIT NEWS

by Captain D.E. Fraser

VISITS

Col Protheroe, Maj Andrews and Capt Fraser visited the Gagetown and Cornwallis clinics during November and December ... From 18 to 22 November, Maj Andrews gave presentations to Gagetown dental officers and nine guests from the Fredericton area ... In December at Cornwallis, Maj Andrews also presented a lecture on *The Establishment of Prognosis in Periodontal Therapy* and a surgical demonstration of Masticatory Mucosal Free Graft. Six of the local area dentists attended.

IN THE NEWS

At CFB Gagetown Sgt Bob Scheer was a guest of Mrs Mill's kindergarten class where he demonstrated proper care of the teeth. Participants were impressed with the size of the tooth brush and teeth used in the demonstration.

The Oromocto High School has carefully selected a few grade 10 students for training in a new educational concept. One of the students, Miss Marilyn Hanlon, in training to become a dental assistant, is learning all the aspects of the trade by "on-job" training at CFB Gagetown clinic.

HOLLY AND MISTLETOE

The 1973 Christmas dinner and dance was held in the Spanish Room at the WO and Sgts Mess, CFB Shearwater. During the festivities, Col Protheroe outlined the past year's achievements and thanked all unit members for their excellent support during the year, and Sgt Sabine-Pasley received his CD from Maj Kelland.

(Left to right) Maj Kelland, Sgt Sabine-Pasley, Cdn Forces Decoration.

Col and Mrs Protheroe hosted the dental officers and their wives at a wine and cheese party during the Christmas holidays. When his supply of "store-bought" wine ran out, "Saki" (his home-made wine) was introduced. Mrs Protheroe received many calls of thanks for an excellent party, and Col Protheroe an equal number requesting his wine recipe.

SPORTS

At Cornwallis, Maj Brown, Capt Bradley and Sgt McDonald are coaching teams in

the minor hockey league. Maj Brown plays hockey for the Officers' Mess while Capt Bradley plays for the Base team. Maj Brown is also a member of the Base curling team and played in the "Regionals" in Chatham on 10-11 January ... At CFS Gander, Cpl Baird has entered the beard growing contest for the station winter carnival. He has been cautioned to watch out for the cord on the belt-driven handpiece ... At Gagetown Maj "Sieve" Stammers tends goal for the Med-Dent hockey team. It seems Capt Fred Sasse and other defencemen don't give Maj Stammers much protection from the opposing players ... While on leave Sgt Tom Girdlestone spent four days assisting his landlord at the live fox and mink show in Charlottetown PEI. A fox bit Tom on his right hand on two occasions. He spent the rest of his leave recuperating but being left-handed, was able to "carry on" when he returned to duty.

13 DENTAL UNIT NEWS

by Lieutenant J.W. Shore, CD

ANNUAL CONFERENCE

13 Dental Unit held its annual conference 22-23 November. Sixty officers and other ranks attended, representing every detachment in the unit.

MGen H McLachlan, Commander Air Transport Command, opened the conference; and BGen LG Craigie, DGDS, addressed the conference. Guest speakers were Maj H Wood from DDTS, Maj MB Fisk, CO 1 DED, and MWO C Adams, dental tradesmen career manager.

The conference provided opportunities for those attending to update themselves on current policies and procedures and allowed for an evening of socializing and renewing comradeships.

FICD INDUCTION

Col WR Thompson was inducted as a Fellow of the International College of Dentists on 16 October during the Canadian Dental Association Convention.

MIDDLE EAST

On 9 November HQ and Trenton Detachment said bon voyage to Sgt Nelson Highfield on his departure to the Middle East. 13 Dental Unit has also contributed Maj H Griesbach (North Bay) and Sgt H McRae (Petawawa) to the Canadian Contingent, UNEF Middle East.

DENTAL TECH EXAMS

For the second consecutive year the Governing Board of Dental Technicians of Ontario selected WO JE Clarke, D Lab Tech, Petawawa detachment, as Assistant Conductor of Examinations for aspiring dental technicians. From all reports, he did an outstanding job. On the other side of the fence, in September Jim received his Province of Ontario denture therapist licence after being tested in Toronto.

A CHICKEN AND A HAIRPIECE

St Nick came bearing gifts on a surprise visit to the HQ and Trenton detachment Xmas party. He presented Col and Mrs Thompson each with a live chicken as live stock for the farm Col Thompson recently purchased. However, inflation set in and the chickens are no more ... Lt Shore received a hairpiece from Santa. Jack wears it to bed and dreams of being able, at long last, to get a haircut ... The party committee put in many hours arranging and decorating for this festivity.

SPORTS HOT SEAT

Rumour has it that Sgt Russ Black (Toronto detachment) caught a 17-inch Rainbow trout. Why did he eat it before a photo was taken??? Sounds like a fishy tale to us.

13 DENTAL UNIT ANNUAL CONFERENCE. *(Left to right) TOP PHOTO, seated:* Maj Nye, Maj Wood, Maj Fisk, LCol Windsor, BGen Craigie, Col Thompson, LCol Gullekson, Maj Dombowsky, Maj Walker. *Standing:* Maj Jones, Maj Marion, Capt Orenczuk, Capt Higgins, Capt Thompson, Capt McPhee, Capt Alberti, Capt Meredith, Lt Shore, Capt Smith, Capt Jury, Capt MacInnis, Capt Burns, Capt Chestnut, Capt Kropinak.
BOTTOM PHOTO, seated: Sgt Proud, MWO Adams, WO Fret, MWO Kidd, MWO Matheson,BGen Craigie, Col Thompson, MWO Raymond, MWO Fediuk, WO Clarke, WO Dion, Sgt Haiplik, Sgt Ritchie. *Standing:* Cpl Mullin, Sgt Hope, Sgt Danyluk, Cpl White, Mrs Holmes, Sgt Cormie, Sgt Schultz, Sgt Curtis, Cpl Payette, WO Lowery, Mrs Macklin, Sgt Bosch, Cpl MacNeil, Cpl Lambert, Cpl Gemme, MCpl Renwick, Sgt Mahlitz, Pte Wade, Cpl Purich, M Cpl Frank, Sgt Jenereaux, Cpl Bodfield, Sgt Mason, Cpl Vasek, MCpl Butson, Cpl Thomson, Sgt Black.

APOLOGY. We regret the misunderstanding which arose from an item on page 15 of the July 1973 issue titled "Commandant's Farewell". Apart from the purely typographical error of substituting "his occasion" for "this occasion", the thanks and gift presented by CWO Sadler were on behalf of all the dental hygienists and therapists in the CFDS and were not restricted to those at CFDSS.

14 DENTAL UNIT News

by Sergeant A. Gray, CD

PRAIRIE PATTER

Sgt DA Roy was a member of the City of Winnipeg Massed Pipe and Drum Band which led the Tournament of Roses Parade in Pasadena, California, on New Year's Day. It was a chilly 50 above during the parade, the announcer said, and here in Winnipeg we were watching while the outside temperature rose all the way up to 3 below zero. This was the first time the Tournament of Roses Parade was led by a band not belonging to a college participating in the Rose Bowl Game. The band also performed at Disneyland, on the Queen Mary, and at the NBC Band Review.

Sgt Roy was taught bagpipes by his father, Pipe Major Wallace Roy, who was the original "Border Piper" of Nova Scotia. Sgt Roy joined the Pictou Highlanders (M) in 1945, served with the 1st Canadian Highland Battalion and the 1st and 2nd Battalions Black Watch (RHR) of Canada from 1951 until his transfer to the RCDC in 1965. He is now with the dental clinic at CFB Shilo.

LOOK OUT, CHARLES ATLAS! The staff of Cold Lake dental clinic recently achieved a 100% pass record on the semi-annual physical fitness test. Other than Phys Ed and Recreational Staff, the dental detachment was the only group to achieve this record.

Sgt J Walker is now president of the CFB Cold Lake minor soccer league. The base has both summer and winter leagues and the job of president is no small chore with between 700 and 800 youngsters participating.

Cpl S Greene is spending a lot of her off-duty time as a trainer in the Medley Dog Obedience School. It's not clear whether she is practicing for improved patient management or preparing for marriage.

Better late than never, said the computer. Sgt WE Tweed recently received his CD, backdated to 9 May 1971.

ACCREDITATION COMMITTEE FIRST

LCol JJN Wright, Base Dental Officer CFB Cold Lake was recently appointed the first military member of the Accreditation Committee of the Canadian Dental Association Council on Education. He and six other members of the Committee visited the Faculty of Dentistry, University of Toronto during the week of 4 November to evaluate postgraduate training programs in Oral Pathology, Oral Surgery and Periodontics.

FISHING FROLICS

The past summer proved that Cold Lake is the centre of a fisherman's paradise and that some of the dental personnel there are ardent fishermen. Many expeditions were undertaken, all of which netted an abundance of fish and fish tales.

PIC 1. Capt Wright, LCol Wright and Maj Marion display a portion of their mighty catch at a remote lake in Saskatchewan.

PIC 2. WO Ayerst, Capt Rix, Cpl Lamontagne and Maj Foley swear these are not the same fish as in PIC 1.

PIC 3. LCol Wright displays some of the rainbow and brook trout taken by h and Maj Marion at Amyot Lake, Sask.

PIC 4. This 50-lb. Tyee salmon was caught by Michelle, daughter of LCol Wright at Campbell River, B.C., using spinning reel and 12-lb. test line. Mi elle was giving her father a fishing l son at the time.

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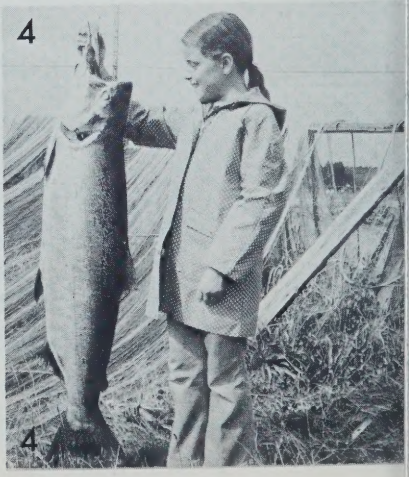
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15 DENTAL UNIT News

by Lieutenant M. Gelinas

'HRISTMAS 1973

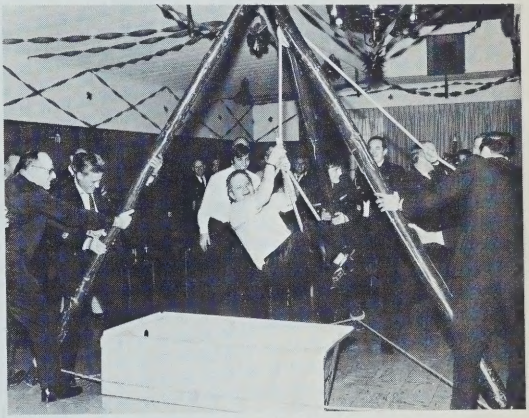
The unit Christmas party was held in alcartier instead of Montreal this ear. This made distances shorter for ersonnel to travel from the eastern art of the province. In spite of a nowstorm which made driving hazardous, ver 70 people attended. Someone sug- ested we should celebrate Christmas n July.

'ROMOTION

Col MacDougall presents Marcel Beau- ais with his warrant scroll on promo- tion to CWO effective 1 October. Marcel as been with the Dental Services since the Korean War. He is in charge of the Central Laboratory at St Hubert.

RETIREMENT

Sgt Dick Innis has retired after 20 years service. He was well feted by the clinic staff and the Sgts Mess at CFB St Jean. The clinic staff presented him with a clock-radio and



the members of the Sgts Mess rechristened him into civilian life. (Yes, Virginia, there was ice-water in the tub.)

SPORTS

Maj Georges Jacques and MCpl Frechette from Bagotville were moose hunting in the Senneterre area again this year. They think they saw the same moose they tracked last year, but once again they didn't shoot it - because it was still too small. A likely story!!

35 FIELD DENTAL UNIT News

by Sergeant B.F. Hannay, CD

'ESTIVE SNOW

For the 1,973rd consecutive year (give or take a few) the Christmas season has come and gone. Although we are still waiting for the snow to come and stay, during the first week of December we had a fantastically low temperature of 0 degrees - the coldest recorded in Lahr in 100 years, and four inches of snow - the most in four years.

AUTOBAHN BAN

Perhaps you are aware that we have a driving ban in effect in Germany. This has forced a stepped-up production and usage of two-wheeled, one-manpower type of transportation. It seems everyone now has such a vehicle.

For those in Canada who are thinking how nice it is to drive over here, the

following ration scale is in effect for Canadian Forces personnel: 69 gallons per month for big cars and 36 gallons for small ones. The only exception to the driving ban are duty personnel such as the Duty Dental Officer who is permitted to drive from his place of residence to work and return.

PROMOTED

MWO Jim Bleakney being presented with new rank badges by LCol JM Donely.

NO BUCK FEVER HERE

Who said you couldn't hunt deer while doing a tour in Germany? The truth is that Cpl Derek Bowering decided that an impending posting to Germany wouldn't stop him from hunting deer - his favourite sport.

Nova Scotia was the hunting ground, and on the fourth day, early in the morning, his 12-gauge Remington hit home Derek claims his 4 point 175-lb buck decided to commit suicide; it stood in a spot about 80 yards away until the fourth slug hit him in the shoulder. (Where did the other three slugs go?) Derek doesn't claim to be a good shot or a good hunter and when it comes to deer, you have to be in the right spot at the right time.

DENTAL DETACHMENT CYPRUS NEWS

CLINICAL CONFERENCE

Capt DM Spencer attended a clinical conference in RAF Akrotiri on Rheumatic Fever - Dental Implications and also the HQ UNFICYP medical conference which was followed by an enlightening visit to a local meat factory. (No more sausages!!)

SOCIAL

The Dental Staff enjoyed the Christmas festivities here with Sgt Griffiths' booming tenor-baritone leading the Canadian Contingent choir, Capt Spencer carolling Christmas Eve at the OP's and VIP homes, and Sgt Lindsay organizing the Christmas Day dive. The Rothmans

Christmas show with Tommy Hunter et al was good entertainment, and the Christmas turkey was great. As well, the Dental team had an evening at Skorpios for French cuisine, highlighted by two dozen gargantuan escargots ... A very successful Bar-B-Q was held with guests including LCol Newlyn from Dhekelia and his hygienist, and the Austrian dentist and dental assistant from HQ UNFICYP.

SPORTS

Sgt Griffiths and Capt Spencer are both suffering from the effects of a busy basketball schedule - four games in six days. Tiny Griffiths has blistered feet, but a shrinking waistline, and Capt Spencer has a recurrence of the shin splints that plagued him during his high school days. Both have been excused compulsory P.T., having qualified a second time this month in the mile and a half run, Capt Spencer in 9.04 ... Sgt Flipper Lindsay has continued his scuba diving every weekend, including two night dives, but a barrage of partial denture cases kept him busy by his Bunsen burner day and night until his departure for Lahr on 9 January.

DENTAL DETACHMENT MIDDLE EAST NEWS

OUR MEN IN EGYPT

Five members of the CFDS are providing dental care for the nearly 1,200 members of the Canadian contingent to the UN peacekeeping forces in the Middle East.

For Maj H Griesbach of North Bay, the officer in charge and Sgt TR O'Mara of St Hubert, such an assignment is not new, both having served in Cyprus. The other three members of the staff are Capt JJ Lemieux from Valcartier, Sgt N Highfield from Trenton and Sgt H McRae from Petawawa.

The detachment is established at the Nadi Shams racetrack in Heliopolis, a suburb of Cairo. A recent report points up the difficulties encountered in establishing such a service, and the high degree of ingenuity required. Of particular significance were problems in operating the equipment, due to the early scarcity of electrical power and the hazard of drifting sand. This editor was reminded of the "old days" in Camp Borden and nodded a silent "Amen" to Maj Griesbach's final recommendation: *"The old-type field equipment should always accompany the new equipment since it can be operated in conditions which might rapidly ruin the new equipment."*

1 DENTAL EQUIPMENT DEPOT NEWS

by Lieutenant J.J.L. Lamontagne, CD

VISITS

Maj H Griesbach and Sgt NE Highfield, before leaving with the Canadian contingent, UNEF Middle East, attended a display of new ADEC field equipment staged by 1 DED Repair Section personnel. MWO Everett demonstrated the proper method of unpacking, mounting, operating, dismantling, and repacking this equipment. LCol GE Windsor, Maj HJ Marion, Capt PD Higgins, Sgt H McRae and Sgt IG Proud of the Petawawa dental detachment also attended the demonstration.

Col AWD Garlick, D Comd CFB Petawawa, presented Maj NB Fisk with a new Logistics Branch cap badge to replace the "Dental Corps" one he has worn for over 30 years. LCol GE Windsor witnessed the event.

OFF WITH THE OLD - ON WITH THE NEW

Until last fall, Maj Fisk was a Dental Associate Officer. Because the number of DAOs was too small for adequate career development, they were reclassified to either Logistics or Personnel Support. Maj Fisk chose the former.

Although "Logistics" is a new branch, the functions of logisticians are as old as military history. The role of a logistician encompasses the support functions of supply, transportation, and financial services, without which no military organization could exist. Thus, the new Logistics branch badge bears interlocking chain links "denoting the strength in the support provided to the operational element of the Canadian Forces by the united logistics discipline." The motto is SERVITUS NULLI SECUNDUS.

CHRISTMAS CELEBRATIONS

Part of the Christmas celebrations at CFB Petawawa includes the officers and senior NCOs invitation to each other's messes for Christmas cheer. This year the invitation was extended to the officers to visit the senior NCOs' Mess on 19 December. On the evening of that day a Medical-Dental-Legal mess dinner was held at the Headquarters Officers' Mess. Lt Lamontagne represented 1 DED in the absence of Maj Fisk.

SPORTS

Sgt PJ Dumas and MCpl CC Shave were crew members of two teams, skippered by MCpl Ron Gauthier and Cpl Terry Tout which represented CFB Petawawa at the Canadian Yachting Association 420 Class championships and the Canadian Forces Sailing Association championships. The events were sponsored by CFB Shearwater and held in Halifax, 21-23 September.

Thirty-eight two-man teams were entered in the competition, including two teams from Britain and one from Germany. Three run-off races left 20 teams for the final "money" race. When all the tired sailors crossed the finish line, MCpl Gauthier and Sgt Dumas were first in the Canadian Forces Sailing Association entries, winning the Admiral O'Brien Trophy (an award the "Navy" has yet to win), and fourth in the Nationals; Cpl Tout and MCpl Shave were runners-up in the CFSA and sixth in the Nationals.

Admiral DS Boyle presents the Admiral O'Brien Trophy to Sgt Dumas and MCpl Gauthier.

MCpl Gauthier, Cpl Tout, MCpl Shave and Sgt Dumas with the Admiral O'Brien Trophy.

DENTAL SERVICES NDHQ NEWS

FORMER EDITOR ASSUMES NEW COMMAND ON PROMOTION

Colonel Leon A. Richardson was promoted to that rank 27 August 1973, and shortly thereafter appointed Commandant CFDSS at Borden. A 1949 graduate of the University of Alberta, Col Richardson's more recent postings include a 1965-68 tour as Commanding Officer of 4 Field Dental Unit, Europe, and, for the past five years, on staff of the Dental Division, Ottawa.

Although the Treatment Services function of the Division was his primary concern and responsibility in Ottawa, a great deal of Col Richardson's time and talent was expended as Editor of the Quarterly, in which capacity he served with singular success. During his tenure as Editor, the format, content, and readability of this publication were noticeably improved. Each issue was of high quality, was carefully edited and the news content was invariably complete and timely. As evidence of how sorely his abilities in this regard are missed there is no better proof than the observation that acknowledgement of Col Richardson's promotion, appointment and contribution to this periodical was inadvertently omitted from the last issue.

Professional Training

UNIVERSITY OF MICHIGAN

Endodontics, 26 November-8 December
Maj RCA Fearon, Maj G Gunther

Crown and Bridge, 5-16 November
Maj RH Headley

Periodontics, 5-19 December
Capt PW Williams

UNIVERSITY OF BRITISH COLUMBIA

X-Ray Symposium, 1-7 December
CWO J Sadler, MWO GEC Bradley

WALTER REID ARMY MEDICAL CENTER
WASHINGTON DC

Preventive Dentistry, 15-19 October
Capt PD Higgins

DALHOUSIE UNIVERSITY

Continuing Education Oral Surgery 23-24 November
Capts DM Moore, CN Munay, ET Dalzell, TP Levy, MW Garriott

Canadian Forces Training

CF DENTAL SERVICES SCHOOL

Officers Clinical Periodontics, 5-18 December
Maj L Dombowsky, Capts JA Boulanger, JJ Duford, EF Sasse, LR Holland, PW Williams

CF WARRANT OFFICERS SCHOOL

WO Qualifying Course
Sgt JG Hughes

CF OFFICER CADET SCHOOL

Basic Officer's Course, 3 January-29 March
Sgt MG Olynik

CF SCHOOL OF INSTRUCTIONAL TECHNIQUE

Instructional Technique
MWO GEC Bradley, *22 Oct-7 Nov*
WO T Deloughery, *14-29 Nov*

CFB BORDEN

Base Defence Duties Course
Pte PJ Meredith, *17-28 September*
Sgt RK Delmage, *1-12 October*

Base Defence Leaders Course
Capt FJ Marentette, *10-14 December*
Sgt RK Delmage, *10-14 December*

CFB EUROPE

NBC Basic Course
Capts MS Bouris, GP Greenacre, EW Graham, WO JPA Lambert, Cpl D Bowering

CF SCHOOL OF MANAGEMENT

Middle Management, 21 January-8 February
Capt PR Darlington

Training with Industry

TICONIUM COMPANY, ALBANY N.Y.

Ticonium Equipment, 24-28 September
Cpls AM Wilson, RG Duffield

J.F. JELENKO, NEW ROCHELLE

Porcelain to Metal Restoration 1-3 October
WO JA Christiansen

RITTER CO., ROCHESTER N.Y.

Dental Equipment, 5-9 November
Sgts JRY Gratton, PG Cliche, MCpl JLP Violette

Promotions

Brigadier-General

LG Craigie

Colonel

LA Richardson

Captain

DE Fraser, FJ Reid

Chief Warrant Officer

M Beauvais, LR Barrett

Master Warrant Officer

DC Hughes, JO Bleakney

Warrant Officer

HE Ayerst, WR Dawson

Sergeant

JM Walker, JM McKenzie, RL MacLellan

Honors and Awards

CWO MO McDonald (CFDSS) *being congratulated by Governor-General Roland Michener after being installed as a member of the Order of Military Merit during ceremonies at Government House on 19 September. CWO McDonald was cited for his extraordinary ability and selfless dedication to the improvement of training standards. He was also commended for his quick thinking and decisive action in averting a serious injury to a candidate while on a field training exercise.*

CWO McDonald served with the 1st Canadian Parachute Battalion from May 1941 to December 1945. He re-engaged in the CDC in 1954. His ability and dedication soon earned him rapid advancement in his trade. From 1955 to 1967 he served as senior dental assistant in Canada and abroad. For the past six years he has been Training Coordinator at the CFDSS. He has been the principal member of a standards team and has contributed greatly to the understanding and institution of the Management Control System of Training. Besides being responsible for the control of all courses conducted at the CFDSS, he serves as course director and instructor on the dental clinical assistant courses.

In 1968 CWO McDonald undertook a revision of the dental assistant trade, and produced documents which have served as the basis and model for courses given to auxiliaries throughout Canada. He has been consulted in the establishment of dental assistant training at community and technical colleges in many provinces of Canada.

His service to the Base Borden community is also noteworthy. "Chief" McDonald has served for several years as a member of the community council as well as being comptroller of various base organizations and activities.

A devoted soldier - a fine man.

FIRST CLASP, CANADIAN FORCES DECORATION

Sgt JF Hill, WO JE Clarke

CANADIAN FORCES DECORATION

Sgt WE Tweed, Sgt MY Fletcher, Sgt CS Sabine-Pasley

Welcome • Bienvenue

A cordial welcome to the Canadian Forces Dental Services is extended to: Miss Elaine Reimer, Mrs E Foggie, Mrs HJ McDaniel, Mrs Donna Holmes, Cpl RA Bosnell, MCpl JJR Jobin, Mrs S Bolger, MCpl NA McLeod, Cpl MG Gemme.

Farewell • Au Revoir

The best of luck to: BGen GC Evans, Sgt WB Looker, Sgt RB Innis, Sgt RC Wormington, Mrs J Armstrong, Mrs M Dykes, Mrs R Keppler.

Vital Statistics

MARRIAGES

Congratulations and many years of happiness to: Miss Janice MacGregor and Capt RS Haines; Miss Jill Stuart and Capt JA Boulanger; Cpl Judy Hill and Sgt MA Gariepty; Pte JI West and Cpl E Pero.

BIRTHS

Sons: MCpl and Mrs HJ MacGillivary.

Daughters: Sgt and Mrs A Busse; WO and Mrs JG MacPhee; Maj and Mrs HJ Nadeau; WO and Mrs H Ayerst.

CONDOLENCES

Deepest sympathy is extended to Capt DB Smith on the loss of his father.

1 DENTAL CLINIC, CFB EUROPE, LAHR

(Left to right) Front row: Capt E Graham, Capt M Bouris, Maj T Ringland, Capt R Gish, Capt P Greenacre. *Centre row:* Sgt B Gilkes, MCpl M Daniels, MWO J Bleakney, WO JW Lambert, Sgt T Taylor, Mrs M Menn. *Rear row:* Cpl D Bowering, Cpl L Overbye, MCpl T James, MCpl G Jones.

The CANADIAN FORCES DENTAL SERVICES *Quarterly*

VOLUME FIFTEEN • NUMBER ONE • APRIL 1974 •

The CFDS Quarterly

•VOLUME 15 • NUMBER 1 • APRIL 1974•

Published by authority of Brigadier-General L.G. Craigie, CD, QHDS, DDS, FICD, in April, July, October and January, the Quarterly serves as a means for the exchange of ideas, experiences and information within the Canadian Forces Dental Services. Views and opinions expressed are those of the authors and not necessarily those of the Director General of Dental Services or the Department of National Defence.

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(see Page 20)

Subscription: $6.00 per year. New subscriptions or renewals, accompanied by cheque or money order made to "The CFDS Quarterly" should be sent to:

The Director General of Dental Services,
National Defence Headquarters,
Ottawa, Ontario, Canada.
K1A OK2.

A Study of the Dental Condition of the Canadian Armed Forces in 1973 and its relationship with the Preventive Dentistry Program

LIBRARY MAY 8 19 University of Toronto

Major H.S. Wood, CD DDS DDPH

TRODUCTION

The Preventive Dentistry Program (PDP) is a planned, comprehensive and assessable system ough which the Canadian Forces Dental Services (CFDS) provide dental care for the Canadian med Forces (CF). It was developed when it became apparent that the aim of the dental services to ng to and maintain our military forces at the highest possible level of oral health was not being ly met – an observation statistically verified through a series of studies conducted during 1966 and 67.[1]

Embracing the entire spectrum of dental care, from prevention, through restoration to intenance, the program directs all its activity towards specific annual goals, established at the nic, unit and CFDS levels. The degree of success in meeting these goals is carefully monitored. The est tabulations, as recorded in the 1972-73 Annual Report,[2] indicate that nearly 70 percent of nadian Forces personnel are dentally fit whereas in 1969 only 15 percent could be so classified. her data provide equally good evidence that this unique method of supplying dental care is of nificant value in helping the military population attain a higher level or oral health than was retofore possible. The Canadian Forces Dental Services thus takes considerable pride not only in filling its primary role but also in contributing to the broad practice of community dentistry.

Following five years of experience, it was deemed necessary to re-evaluate the dental condition the service community in order to objectively assess the value of the program and establish new selines of the dental needs and experiences of the population. Only through such current and curate knowledge can a meaningful appraisal be made of the modifications required to operate the st possible dental service for the Canadian Forces.

To this end a comprehensive study of the dental condition of the Canadian Forces was nducted in 1973. This article contains a distillation of the full report of the study, which will be blished in the near future.

M

The aim of the study was to determine the dental condition of recruits and serving members of e Canadian Forces in 1973 and to relate it to the condition prior to the initiation of the Preventive ntistry Program.

BJECTIVES

The following objectives were established:

- to determine the validity of the sample population;
- to review previously established procedure timings and maintenance requirements;
- to determine the relative value of two methods of assessing oral hygiene;

- to determine the DMF index and the treatment needs and experience of the 1973 recr and to relate certain of these data to the differences between male and female recr recruits from the two recruit depots, and between recruits and serving members;
- to determine the DMF index and the treatment needs and experiences of the 1973 ser member, and to relate these data to years of service and age;
- to review CFDS treatment data, staff resources and patient commitment in order to iden trends or changes in patterns of care;
- to compare the PDP colour coding of the serving member sample with that of the C general, and to relate colour coding to frequency of participation in the PDP.

BACKGROUND

The Canadian Forces Dental Services has the ultimate responsibility to ensure that all mem of the Canadian Forces are in a state of dental health which will minimize the loss, by reaso dental disorders, of time and quality in the performance of their duties. For various reasons responsibility has never been fully discharged.

In 1966 it was realized that a different approach was required and that, in order to devise it was necessary to determine the types and extent of treatment required. To this end four sur were conducted:

- a recruit survey to provide detailed information about treatment experience, dental c prevalence, periodontal disease, oral hygiene, malocclusion, social and econ background and the demand for treatment;
- a career serviceman study with similar aims;
- a patient participation survey to determine the usage of the dental treatment services; an
- an initial care and a maintenance care survey. The initial care survey determined patient-chair-time required to complete each of the common treatment procedures an average chair-time needed to bring a patient to a state of optimal oral health. maintenance care survey determined the chair-time required to maintain a serviceman in state for one year.

The parameters for those studies were issued in the *Dental Health Indices for the Cana Armed Forces,*[3] and the surveys were conducted during 1966-67. Results were compiled in *Dental Condition of the Canadian Forces – Report of a 2 year Study*[1] published in 1968. extensive study (hereafter referred to as Study A), delineated the magnitude of the dental pro facing the CFDS. When treatment requirements of the population-at-risk were applied to resources available it was apparent that the approach taken in the past would never overcom problem. In response to this realization, the Preventive Dentistry Program was implemented April 1968 to involve the total service population in specified measures of prevention, progra treatment and annual maintenance care. This program provided an integrated and comprehe delivery system of dental services through which it was felt both short term and long term aims o CFDS could be met.

The program was made flexible enough to permit modifications. It took into account not the normal demand for treatment but also the increased activity in the obligatory requirements o program.

Through Study A the oral health of the patient community of the CFDS was defined baselines established for the care required at that time. Indirectly, the study has thus influence annual goals of the PDP and, in light of the five year span, it was considered necessary to brin pertinent statistics up-to-date.

To this end a new study was developed to determine the dental condition of the CF in through survey procedures similar to those used previously. The data were collected in the know that they would not only reflect changes brought about by activity of the PDP but also ch brought about by certain inherent differences between the service populations of 1967 and 1973 as the size of the military population, sex distribution and demographic distribution of recruits value of the PDP in effecting change obviously cannot be quantified but may be demonst qualitatively through findings which can be explained only in terms of a significant increa prevention and/or treatment rendered.

An evaluation was not made of the time required to *create* the increase of dental care which the ıdy shows has occurred. It is self-evident, however, that it takes considerable effort to reach that rtion of the population which resists dental treatment. The PDP requires that every possible effort made to reach, educate and treat such members.

The study was designed to make reasonable demands in terms of personnel and equipment, and intefere as little as possible with normal dental treatment. The parameters are consistent with those Study A.

ETHOD

Sample Selection. The recruit sample included all recruits enrolled in the CF from 1 Apr 73 until e requisite number was obtained at each depot – 240 at CFB St Jean and 420 at CFB Cornwallis – ese numbers being relative to the annual intake at each location. Whereas the recruit sample for udy A was drawn from six depots, the CF now utilizes only two. All French speaking recruits are ocessed at St Jean and those whose mother tongue is English go to Cornwallis.

The serving member sample was formed through computer selection of 618 individuals whose cial Insurance Number ended in the numeral 3.

Standardization. The Study Director standardized the two teams of examiner and recorder at ch of the recruit depots whereas the examination of the serving member sample was standardized ly through the instructions on the survey form and the direction that normal CFDS procedures be llowed.

Data Collected. Each member of the sample was examined in accordance with the detail in the rvey form as reproduced hereunder. Except that an evaluation of plaque index has been added, the rmat is in general accordance with that used in Study A.

Processing of Information. The author, who served as Study Director, tabulated the collected ta. All bite-wing radiographs were interpreted by the same examiner as in Study A. Similarly this me examiner made the Decayed, Missing or Filled (DMF) tabulation, in which third molars and pernumerary teeth were not accounted for. In scoring missing (M) teeth in the surface (S) count, a sterior tooth was rated as three surfaces and an anterior tooth as two surfaces.

The data was grouped into 80 units of information for each sample member and transferred to mputer cards. The results thus obtained from the computer program analyst have been used to mpile the tables which appear in this article.

NDINGS

Sample Data. Recruits-Normality. To determine the relative "normality" of the recruit sample, e Stanine scores from tests of their general mental ability were compared with the distribution in a rmal population. A similar evaluation had been made of the 1967 recruit population and both ıdings appear in Table 1.

TABLE 1 – RECRUIT SAMPLE "NORMALITY"

Stanine Score	Normal Population Percentages	1967 Sample Percentages	1973 Sample Percentages
1	4	2.5	0
2	7	5.1	0
3	12	11.6	1.5
4	17	16.9	16.9
5	20	23.3	28.9
6	17	16.3	22.2
7	12	12.0	16.1
8	7	7.7	9.3
9	4	4.5	5.1

SAMPLE NUMBER

DENTAL CONDITION OF THE CANADIAN FORCES – 1973

This survey has been designed with instructions for completion in each serial. Please read the instructions carefull and complete as indicated. This will standardize the reports and relate them to "The Dental Condition of the Canadia Forces-Report of 2 year study" which was completed in 1967.

1. EXAMINING OFFICER

Name and Initials _____

SIN _____

Rank _____

Clinic Location _____

Date of Examination _____

Signature

2. DISPOSAL OF COMPLETED FORMS

This survey form and radiographs will be placed in the envelopes provided and forwarded to:

Director General of Dental Services

National Defence Headquarters

Ottawa, Ontario

K1A 0K2 Attn: DDTS–3

3. PATIENT INFORMATION

Check one – Recruit ☐ Serving Member ☐

Name and Initials _____ Rank _____ SIN _____

Date of Birth _____ Sex _____ Date of Enrolment _____

Place of Enrolment _____

Recruits only – Name of Hometown _____

How long in that area _____ years

From Serving Member records – Preventive Dentistry Color Code _____

Number of times phase I (or equivalent) received since 1 Apr. 68 _____

4. GENERAL INSTRUCTIONS FOR THE DENTAL EXAMINATION

a. The examination shall be completed by a dental officer.

b. Record the findings of the examination in Serial 6 on page 2.

c. Recruit documentation may be completed in conjunction with the condition on entry examination.

d. Radiographic findings will be co-related to visual findings during the examination and entered in Serial 6.

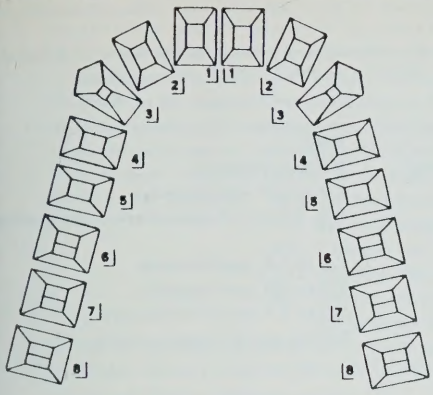
5. RADIOGRAPHS

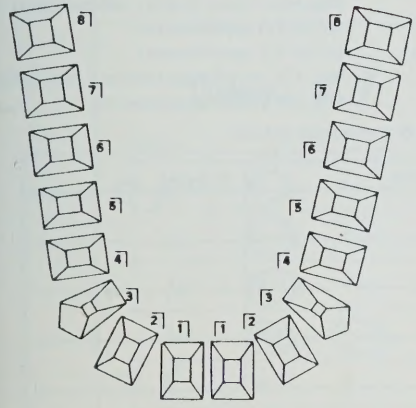
Good quality bite wing radiographs (2 or 4 as required) will be taken covering cuspid to third molar area without overlap. They will be developed and read while the patient is available so that retakes may be arranged if necessa Periapical radiographs are to be taken of third molar areas if third molars are not completely erupted. Edentulous patients will require third molar periapical radiographs.

6. DENTAL EXAMINATION

A.

Patient's right Patient's left





B REMARKS – (if required)

The dental examination will be recorded in Section A (opposite) and entries made as follows;

a. Restorations – outline and block in indicating material and using authorized abbreviations.

b. Caries – outline but do not block in, The DMF surface count is to be used in compiling statistics from this survey to ensure that involved surfaces are indicated. Criteria for indicating proximal surface caries involvement from the bitewing radiographs is for the caries to have penetrated the DE junction. Reading of radiographs will be standardized by use of loopes.

c. Tooth or roots requiring extraction – cover each tooth concerned with an X.

d. Missing teeth – draw a mesiodistal line through teeth concerned and indicate space closure or drifting that has occurred.

e. Non or partially erupted teeth including third molars to be noted and indicated on the record.

f. Indicate supernumerary teeth and draw at approximate location.

g. Impacted Teeth – indicate all impacted teeth noted on radiographs including third molars.

h. Removable Prosthetic appliances – note in the appropriate arch, the type and material used. Do not draw in or diagram the appliance.

j. Fixed bridges and crowns – outline and block in. Indicate the material used.

NOTE 1. CARIOUS LESIONS – are those which the point of the clev-dent #5 explorer will stick and resist removal. Lesions will be charted according to the surface affected. Erosion and abrasion with no evidence of caries will not be recorded nor will developmental enamel imperfections and hard stained enamel surfaces. Inter-proximal roughness or edges capable of holding the explorer point will be recorded.

NOTE 2. RESTORED TEETH – if recurrent caries is present at the margin of a restoration it will be recorded in the correct location.

7. ABBREVIATIONS TO BE USED: Avoid unofficial abbreviations.

Ac	Acrylic	D	Distal	La	Labial	PE	Partially Erupted		
A	Amalgam	En	Root Canal	Li	Lingual	PO	Post Operative	DENTURES:	
Br	Bridge	F	Foil	M	Mesial	Pro	Prophylaxis	CUD	Complete upper
Bu	Buccal	G	Gold	NE	Not Erupted	Ra	Radiograph	CLD	Complete lower
CC	Chrome Cobalt	Imp	Impacted	O	Occlusal	S	Silicate	PUD	Partial Upper
Ce	Cement	In	Incisal	P	Porcelain	Srg	Surgical	PLD	Partial Lower
CG	Cast Gold	I	Inlay	PC	Pulp Cap	WG	Wrought Gold	TD	Treatment Denture
Cr	Crown	J	Jacket	Pe	Periodontal	X	Extraction		

8. ORAL HYGIENE ASSESSMENT – Check one

GOOD	
FAIR	
POOR	

9. THIS SECTION TO BE LEFT BLANK – FOR NDHQ USE

T	S	STANINE
D ____	D ____	
M ____	M ____	
F ____	F ____	
Total ____	Total ____	

10. **TREATMENT REQUIRED**

This section will be used to show the treatment needed to restore the patient to optimal dental health. It is the treatment plan for the member and should be done in conjunction with the radiographs. The criterion for inclusion in the treatment required section may be considered as "what would I want done if this were my own mouth?"

NOTE 1. Remarks column may be used to show number of abutments required if a Br is indicated or any other information that may be used for determining the treatment timings.

2. The Pe column will show the estimated number of 1 hour appointments required to bring the member to an acceptable dental condition and should be calculated from the following tables.

A. CONSERVATIVE TREATMENT

CONDITION	TIME
(1) Diagnosis and treatment planning with x-ray survey	1.0 appointments
(2) Marginal Gingivitis or Generalized Gingivitis	1.0 to 2.0 appointments
(3) Generalized Gingivitis – with pocket formation necessitating packing and curettage	1.0, 2.0 or 3.0 appointments per quadrant
(4) Abcesses	1.0 to 2.0 appointments
(5) Necrotizing ulcerative Gingivitis (Vincent's)	1.0 to 2.0 appointments
(6) Oral Physiotherapy and Maintenance phase	1.0 to 2.0 appointments with follow, up, 0.5 appointments.

B. PERIODONTAL SURGERY

CONDITION	TIME
(1) Gingivectomy, Gingivoplasty or Osteoplasty	1.5 to 3.0 appointments per quadrant dependent upon healing necessitating repa
(2) Flap Operations	3.0 to 4.5 appointments
(3) Mucogingival Techniques	3.0 to 4.5 appointments
(4) Splinting	0.5, 1.0, or 1.5 appointments with follow-u
(5) Occlusal Equilibration	1.0, 2.0 or 3.0 appointments

REQUIRED TREATMENT TO BE SHOWN IN THE TABLE BELOW

Procedure	Number	Remarks
Examination		
Radiographs		
Extraction – single erupted tooth		
Extraction – single unerupted tooth		
Restorations – Multiple surface amalgam		
Single surface amalgam		
Silicate/plastic		
Inlay (cast gold)		
Crown (indicate type)		
*Bridge (Fixed) (Note 1)		
Repair fixed bridge		
Complete denture		
Removable Partial denture		
Denture rebase		
Prophylaxis		
*Hours of Periodontal treatment excluding prophylaxis (Note 2)		
Root Canal (number of roots)		
Other (specify)		

CANADIAN FORCES PLAQUE INDEX

A. INSTRUCTIONS

(1) The index will be determined by a dental officer or dental therapist
(2) Disclosing solution is to be used and will be applied with a cotton swab. Solution to be made from catalogue item 6505-21-853-4628 Erythrosine, Dental Disclosing, powder, 6 gm package
(3) Teeth to be examined are indicated on the diagram
(4) If indicated teeth are missing – substitute as below and note on the diagram:
  a. Molar/bicuspid – nearest tooth of the same type in the same arch.
  b. Incisor – nearest incisor in the same arch or cuspid if there are no incisors (see B example).
(5) To score: Encircle – M/1 if plaque contacts gingiva on mesial proximal surface
  – F/3 if plaque contacts gingiva on the facial surface
  – D/1 if plaque contacts gingiva on distal proximal surface
  – L/2 if plaque contacts gingiva on the lingual surface
  – O/3 if there are areas of plaque unrelated and not continuous with plaque at the gingival margins
(6) Sum of encircled numbers is the teeth score.
(7) Plaque Index is the sum of tooth scores (see B example)
(8) Record Plaque Index in section "C".

B. EXAMPLE

PLAQUE INDEX

NAME Adam E.V. SIN 106-750-228 DATE 3 Apr 73

TOOTH	AREA					SCORE
L7 ~~6~~	(M/1)	F/3	(D/1)	(L/2)	(O/3)	7
1	(M/1)	F/3	(D/1)	L/2	O/3	2
4	(M/1)	F/3	(D/1)	(L/2)	O/3	4
6	(M/1)	(F/3)	(D/1)	(L/2)	(O/3)	10
7 ~~6~~	M/1	F/3	(D/1)	(L/2)	O/3	3
4	(M/1)	F/3	(D/1)	(L/2)	O/3	4
TOTAL for all teeth (Plaque Index)						30

C. PLAQUE INDEX

NAME..... SIN..... DATE.....

TOOTH	AREA					SCORE
6	M/1	F/3	D/1	L/2	O/3	
1	M/1	F/3	D/1	L/2	O/3	
4	M/1	F/3	D/1	L/2	O/3	
6	M/1	F/3	D/1	L/2	O/3	
1	M/1	F/3	D/1	L/2	O/3	
4	M/1	F/3	D/1	L/2	O/3	
Total for all teeth (Plaque Index)						

The 1967 sample approximates the "normal" but the 1973 sample is slightly above average. This shift may be because the 1973 standards for recruiting at the time of sample selection were higher than normal. Although a correlation between mental ability and dental condition has not been established, the "above-average" status of the 1973 recruit sample may form a slight bias.

Recruits – Sex. The expanded role of the female in the CF is attested to by inclusion in the recruit sample of a significant number of female recruits.

Recruits – Age. On checking with CF statistics for all recruits, it was found that the 1973 recruit was older and better educated, indicating that the young Canadian is remaining in school longer.

Enrolment in the CF depends upon rate of unemployment, attractiveness of the Forces, and recruitment activity.

The average 1973 male recruit was 19.3 years old and the female recruit was 20.5 years of age. In comparison, the 1967 sample had an average age for male recruits of 18.4 years and female recruits of 19.3 years.

Overall, the average recruit in the 1973 sample was nearly one year older than his counterpart in 1967.

Recruits – Origin. The province of origin of the recruit sample was reviewed and the distribution compared with that of the entire Canadian population. The proportion of recruits from Quebec, the Atlantic provinces and British Columbia was found to be higher than in the Canadian distribution.

The intake of French speaking recruits is significantly higher than it was in 1967.

Serving Member – Age. The ages of serving members varied from 19 to 55 years, with an average of 34.3 years. As might be expected, there was a strong relationship between age and length of service, which varied from 1 to 34 years with a 14.1 year average.

Serving Member – Validity of Sample. The percentages of the various ranks in the serving member sample was found to be in statistical accordance with the distribution throughout the CF.

It had been established that the sample would be considered representative if a minimum of 8 percent of those selected were examined. The sample was composed of 86 percent of the potential 618 members.

Personal Care Indices. *Plaque Index.* Plaque indices indicate oral hygiene status and potentiality toward disease and do not reflect a periodontal state or constitute a disease baseline as such. Primarily an educational and motivational tool, their chief fault is that they reflect the dual subjectivity of the clinicians assigning and interpreting the index. Because of this subjectivity and the difficulty of standardization, they are best used in clinical studies and in individual patient progress measurement.

Various plaque and hygiene indices[4,5,6,7,8] were examined and features from several incorporated into the index used in this survey. The weighing is toward the facial and lingual aspects of the dentition in order to demonstrate gross deficiencies in oral hygiene habits. A weighing toward the interproximal would, primarily, have pointed up the lack of use of dental floss. This index has a range of 0–60, the higher the number the greater the amount of plaque.

The results indicate the serving member to have less plaque than the recruit and that the female has less plaque than the male.

Oral Hygiene Assessment. The oral hygiene assessments used are as subjective as plaque indices and involve ratings of "good", "fair" or "poor". The findings indicate that overall, the oral hygiene is better in 1973 than it was in 1967.

The plaque index is correlated to the oral hygiene assessment in Table 2.

The inference is that an oral hygience assessment of "good" exists with low plaque indices, and an assessment of "poor" is associated with indices over 40. There may have been a tendency on the part of the examiner to be less tolerant of the serving member sample than the recruit sample in assessing oral hygiene by both methods.

DMF Indices. The dental condition of populations can be compared by means of the DMF index. This system of measurement is of considerable value in comparing different samples of similar age groups in a young population. The surface count is more accurate than the tooth count but its usage presents problems. For example a missing tooth cannot represent a precise number of decayed surfaces and study directors arbitrarily assign a value of from 2 to 5 surfaces to a missing tooth. T

TABLE 2 – PLAQUE INDEX – ORAL HYGIENE ASSESSMENT CORRELATION

Oral Hygiene Assessment	Sample	Average Plaque Index
Good	Male recruit	30.8
Good	Female recruit	27.0
Good	Serving member	18.0
Good	Total sample	24.1
Fair	Male recruit	31.8
Fair	Female recruit	35.3
Fair	Serving member	25.5
Fair	Total sample	29.2
Poor	Male recruit	45.5
Poor	Female recruit	45.0
Poor	Serving member	38.5
Poor	Total sample	42.9

ain greater objectivity the DMF Teeth (or (T)) count was utilized in the present study. Surface nt served merely to verify the DMF (T) findings.

Third molars were not used in the count, and carious teeth and surfaces were recorded as "D" n though a restoration was present. A missing anterior tooth was counted in the DMF Surface (or) count as two surfaces and a missing posterior tooth as three surfaces.

DMF Index – Recruits. The DMF Index for the 1973 recruit sample is presented in Table 3.

TABLE 3 – DMF – ENTIRE 1973 RECRUIT SAMPLE

DMF (TEETH)			DMF (SURFACE)		
	Mean	s		Mean	s
Decayed	7.611	4.53	Decayed	11.064	8.60
Missing	4.656	6.39	Missing	12.794	16.74
Filled	3.022	4.13	Filled	7.441	10.28
Score	15.289		Score	31.839	
Tooth range	1-28	n=670	Surface range	1-72	

DMF indices for the various segments of the recruit population are presented in Table 4.

BLE 4 – DMF – 1973 RECRUIT – BY SEX AND LOCATION

		DMF (TEETH)				DMF (SURFACE)			
Recruit	n	Decayed	Missing	Filled	Score	Decayed	Missing	Filled	Score
e Cornwallis	315	8.199	2.715	3.325	14.239	11.661	8.515	8.892	29.068
nale Cornwallis	113	4.956	3.044	6.053	14.053	6.186	8.283	13.283	27.717
al Cornwallis	428	7.345	3.035	4.044	14.424	10.219	8.455	10.040	23.714
e St Jean	217	8.304	7.507	1.110	16.921	14.447	20.424	2.581	37.452
nale St Jean	25	6.160	7.720	2.080	15.960	10.680	21.040	5.040	36.760
al St Jean	242	8.083	7.529	1.211	16.823	14.058	20.488	2.835	37.381

St Jean recruits have a statistically higher DMF score than those from Cornwallis, verifying a ding in Study A that the incidence of dental caries is higher in Quebec, British Columbia and the ritime provinces. Inasmuch as the St Jean recruits represent over one third of the total recruit ulation, their higher DMF index influences the index for the entire sample. This observation helps lain why the 1973 recruit population showed a significant increase in DMF over the recruit sample

of 1967, which contained a much smaller percentage from Quebec.

The DMF (T) for male recruits in both studies are presented in Table 5.

TABLE 5 – DMF (T) – MALE RECRUITS

	DMF (T) 1973		DMF (T) 1967	
	Mean	s	Mean	s
Decayed	8.242	4.55	7.165	4.08
Missing	4.854	6.55	4.486	5.53
Filled	2.424	3.76	2.935	3.91
Score	15.520		14.586	

The DMF index of the CF is compared to those from other North American studies of yo adults in Table 6.

TABLE 6 – DMF(T) – YOUNG ADULT MALE – NORTH AMERICA

Study	Age	D	M	F	DMF(T)
Canadian Forces 1973	18-24	8.2	4.9	2.4	15.5
USA National Health 1960-62[9]	18-24	2.1	5.0	7.2	14.4
Ontario Colleges 1973[10]	17-25	2.3	1.6	7.7	11.7
Canadian Forces 1967[1]	18-24	7.2	4.5	2.9	14.6

Part of the variation in the DMF (T) figures in Table 6 can be accounted for by regio differences. As noted previously, the CF sample contains a high proportion from an area of h caries incidence whereas the Ontario Colleges Study involves only students from that province, wh has a low caries incidence. The USA study involves a much broader distribution and shows clo correlation with both CF studies.

Table 6 also indicates that the male enrolling in the CF has had little treatment experie compared to other groups of the same age. Previous studies indicate that socio-economic status is a factor in caries incidence but that the F/DMF index or amount of treatment received varies direc with the socio-economic standard of the individual.[1,10]

DMF Index-Serving Members. There was no significant difference between the DMF (T) of male serving member and the female.

The DMF index for teeth and surfaces of the 1973 Serving Member and the DMF (T) of 1967 serving member is presented in Table 7.

TABLE 7 – DMF – SERVING MEMBER

	DMF (Teeth) 1973		DMF (Surface) 1973		DMF (Teeth) 1	
	Mean	s	Mean	s	Mean	s
Decayed	1.72	2.42	2.13	3.45	2.71	2.9
Missing	7.48	7.37	20.48	19.21	7.92	7.5
Filled	7.93	5.20	18.63	14.23	7.30	5.3
Score	17.13		41.24		17.93	
	n = 532		n = 532		n = 604	

A comparison of the DMF (T) scores of the two surveys shows a reduction of 0.8 DMF(T) wh is statistically significant to the 0.5 level and may be attributed to a reduction of decayed and mis teeth which has not been offset by an equivalent increase in the number of filled teeth. This fin may be the result of increased primary prevention.

Treatment Requirements. Individual treatment plans to bring each member of the recruit sample a state of optimal oral health were developed without regard to caries rate, oral hygiene or personal terest. Sub-samples were identified and the treatment required for each sub-sample was adjusted to present a sample size of 1,000. Procedural timings and treatment detail as developed in Study A ere applied.

Table 8 summarizes the number of procedures and clinical man-hours required to bring 1,000 embers of each sub-sample to a state of optimal oral health.

TABLE 8 – RECRUIT TREATMENT REQUIREMENTS

Sample	Sample Size	Treatment Procedures* for 1,000 Recruits	Clinical Man-Hours for 1,000 Recruits
1973 Cornwallis Male Recruit	315	14,047	7,539.26
1973 Cornwallis Female Recruit	113	9,849	5,535.89
1973 St Jean Male Recruit	217	13,999	7,654.22
1973 St Jean Female Recruit	25	10,520	6,415.45
1973 Male Recruit (total)	532	14,072	7,603.89

*"Procedures" represent various types of treatment and cannot be related directly to the timings.

The male recruits from both Cornwallis and St Jean required a similar number of treatment ocedures and amount of treatment time. In general, the female recruit is in a better dental ndition than the male.

The average 1973 male recruit requires 7.6 hours of clinical treatment to bring him to a state of timal oral health.

Table 9 is a summary of the treatment time and procedures required to bring 1,000 serving embers to optimal oral health. The 1973 sample was broken down into two sub-samples.

TABLE 9 – SERVING MEMBER TREATMENT REQUIREMENTS

Sample	Sample Size	Total Procedures Per 1,000	Clinical Man-Hours Per 1,000
Serving Member – 1967	604	12,668	5,932.40
Serving Member – 1973	532	11,059	4,391.56
Serving Member *(Red Coded) – 1973	381	9,761	2,893.47
Serving Member *(Non Red Coded) – 1973	151	15,061	5,948.41

'Red coded" indicates that the member meets the standard for dental fitness which is; free from pain, free of ctive oral disease and fit, in the judgement of the dental officer, to carry out his military role without need for ther than emergency dental care for one year.

To bring him to a state of optimal oral health, the average serving member in 1973 requires 4.39 inical man-hours of treatment, of which an undetermined portion is represented by an annual aintenance factor which will be dealt with under the heading of "Discussion".

The 1973 serving member is in better dental condition than the 1967 serving member, primarily terms of the basic restorative and surgical branches of dentistry. There is also a reduction in the ported need for periodontal treatment which is largely offset by an increase in prophylaxis quirements. These observations suggest that a change in the subjective assessment of the examiners as occurred.

Treatment Patterns. The treatment experience of both recruits and serving members was viewed. Sixteen percent of the serving members required no treatment whereas less than 1 percent

of the male recruits were so assessed.

The amount of completed treatment visible at the time of examination is presented at Table 10 This treatment does not necessarily represent the past or total treatment experience. For example more partial dentures have been produced than are being worn, a finding which is particularly prevalent when dental care is provided at no cost to the patient.

TABLE 10 – OBSERVED COMPLETED TREATMENT PER 1,000 SAMPLE MEMBERS

Treatment	Recruits	Total Serving Members	Red Coded Serving Members
Complete dentures	93	162	163
Partial dentures	49	122	124
Amalgam Surfaces	6,796	16,620	18,067
Acrylic/Silicate	935	3,962	2,111
Crowns	43	173	207
Inlays	0	122	127
Bridges	3	92	124
Endodontics	13	77	78
Sample size	669	532	387

THE PREVENTIVE DENTISTRY PROGRAM

General – The PDP incorporates two phases – Phase I being the preventive portion and Phase I the treatment portion – and combines these into a "Total Program" which involves achievement o specific goals as set forth in annual objectives.

One of the observations raised early in the program was that the heavy emphasis placed o prevention might reduce significantly the time available for and delivery of restorative treatment. I view of the staggering amount of restorative treatment represented by both the serving members an the annual intake of approximately 10,000 recruits, it was thought that such emphasis on preventio could well become a major factor in failing to attain the overall aim of the program, which is to brin as high a percentage as possible of the CF to a level of dental fitness.

Although there was every reason to believe that such has not been the case and that the aim o the program was being admirably met, this survey permitted a statistical analysis of the observatior To this end the following data were collected:

- dental personnel resources (number of dental staff providing treatment);
- patient commitment (number of members of the CF); and
- amount of treatment provided.

These data are presented at Tables 11 through 14 and include entries for the years 1965 to 196 in order to establish a base line prior to implementation of the PDP in 1968.

The patient commitment, resources or treatment cannot be related to either civilian practice o other armed forces because of various factors such as the training and operational commitment varied locations and patient loads, various sized clinics, and the administrative responsibility However, these factors are relatively consistent within the CFDS from year to year and the figure cited are relative to each other.

Resources. The personnel resources as represented in Table 11 include dental officers engage strictly in administration.

Commitment. The patient commitment has been reduced considerably since 1965 as shown i Table 12.

Treatment. Tables 13 and 14 contain the amounts of treatment provided over the same perio

TABLE 11 – PERSONNEL RESOURCES

Year	Dental Officer	Dental Laboratory Technician	Dental Therapist-8 (Expanded Duty)	Dental Therapist-6B (Hygienist)	Dental Clinical Assistant	Civilian Therapist
1973	181	72	10	27	151	4
1972	189	77	10	28	160	4
1971	199	74	9	26	164	5
1970	185	82	10	29	159	5
1969	191	82	11	36	175	5
1968	192	84	13	31	179	5
1967	192	84	11	34	193	5
1966	182	85	11	28	200	5
1965	180	82	9	25	206	5

TABLE 12 – PATIENT COMMITMENT

Year	Service Patient Commitment
1973	82,500
1972	85,000
1971	89,500
1970	93,500
1969	98,500
1968	101,500
1967	105,500
1966	107,500
1965	114,000

TABLE 13 – TREATMENT RENDERED – 1

Year	Amalgam Restorations		Anterior Restorations	Crowns or Inlays	Bridges	Complete Dentures	Partial Dentures
	Surfaces*						
1973	186,269		51,284	1,958	1,723	2,423	2,638
1972	190,643		49,937	1,905	1,625	2,596	2,712
1971	194,528		43,168	1,924	1,784	2,681	2,800
1970	191,507		35,519	2,057	1,443	3,018	3,302
	Multiple**	Single***					
1969	76,172	50,078	34,571	2,213	1,638	3,253	3,775
1968	75,979	50,819	35,300	2,309	1,812	3,255	4,015
1967	72,510	50,358	34,199	2,518	1,814	3,336	4,326
1966	77,211	57,894	37,509	2,375	1,928	3,678	4,855
1965	71,978	55,316	33,979	2,122	1,706	3,477	4,806

*'Surfaces' means actual number of surfaces restored.

**'Multiple' means more than one surface restored.

***'Single' means only one surface restored.

TABLE 14 – TREATMENT RENDERED – 2

Year	Extractions *	Endodontics	Examinations **	Radiographs
1973	26,595	2,877	104,277	123,760
1972	28,751	1,752	104,457	118,212
1971	30,767	2,418	94,465	115,976
1970	33,740	1,795	97,646	133,353
1969	37,196	1,909	105,288	153,998
1968	39,725	1,945	98,821	124,602
1967	39,864	1,682	106,514	111,307
1966	45,287	1,426	120,424	101,954
1965	46,922	1,111	111,202	97,837

* Impactions are not included.
**Includes annual examinations as required by the PDP and those for personnel enrolling in or released from the CF.

Observations. The treatment timings established in Study A were applied to the vario procedures listed in the foregoing two tables and the following variations noted in the time spent those procedures in 1973 as against 1965.

- Endodontics consumed an increased treatment time of 3,700 hours
- Anterior restorations – an increase of 6,400 hours
- Extractions – a decrease of 4,900 hours
- Complete dentures – a decrease of 1,700 hours
- Partial dentures – a decrease of 3,000 hours
- Crowns and inlays – a decrease of 250 hours
- Although it is impossible to apply timings to amalgam restorations for the entire period, t pure numbers from 1965 to 1969 are reasonably constant as are those from 1970 to 1973. is concluded, therefore, that the time spent in these procedures has also remained relative constant.

The combined observations indicate that as much treatment time is being rendered in 1973 there was in 1965, even though the proportion of time spent in specific procedures has changed.

Although a "cause and effect" relationship between these findings and the PDP cannot verified, these statistics establish that THE PREVENTIVE DENTISTRY PROGRAM HAS NO CAUSED A REDUCTION IN THE RESTORATIVE TREATMENT RENDERED BY THE CFDS.

This means that today's 82,500 service member population is receiving approximately the sa amount of treatment as the 114,000 service member population of 1965 or, to put it another wa the average 1973 service member is receiving about 26% more dental treatment than did his 19 counterpart. Furthermore, he is receiving the added benefits of a preventive dentistry program.

It is also noteworthy that all this is being produced by fewer resources of dental manpower.

The only significant change in the provision of dental care for the CF member during the peri was the implementation of the PDP. Therefore, it may be inferred that the program is larg responsible for these achievements. The key factors may be prevention, planned treatment, motivati of dental staff and service members, or all of these, but in any event the continuation of this to service appears to be justified.

Treatment Patterns. Since the initiation of the PDP many notable changes have been manifest dental treatment patterns. Some of the factors involved in these changes are:

- fewer missed appointments – believed to be the result of an increase in the appreciation oral health by the patient and the increased interest in this regard of all commanding office
- streamlining of educational and preventive procedures;
- fewer dental emergencies;
- a monitored annual dental examination negates the need for examination at other times a

provides a means for early recognition and elimination of potential emergencies;
- increased productivity of dental staff through increased motivation and programmed treatment;
- improved oral hygiene of the patients, resulting in improved working environment and a concomitant reduction of time expended in dental procedures.

Phase I. Phase I of the PDP involves an annual examination, prophylaxis or self-preparation ocedure, the application of a topical fluoride and radiographs as required. The dental records of the rving member sample, approximately 85 percent of whom have served since 1968, were checked to termine the number of times the Phase I had been recorded since April 1968 when the program gan. The following tabulation was made:

Members with Red coded charts	–	2.92 Phase I's
Members with Blue coded charts	–	2.13 Phase I's
Members with Yellow coded charts	–	1.46 Phase I's
Members with uncoded charts	–	1.23 Phase I's

The dentally fit patient (RED CODED) received more Phase I treatments than the other patients, ggesting that either fitness results in interest or interest results in fitness.

Coding. The PDP utilizes a system of colour coding in which the colour RED signifies the rviceman is dentally fit by the standards of program fitness. BLUE denotes that he requires three urs or less treatment time to bring him to a state of dental fitness while YELLOW indicates that e members is included in the program but requires over three hours of treatment time to make him ntally fit.

The colour coding of the sample serving members is compared with the coding of all CF rsonnel in Table 15. The dental documents of members on terminal leave, or who are otherwise yond the CFDS area of responsibility, are not available for verification of coding and hence gment the "other" classification in the "Total Forces" column of Table 15 and form a bias on all e figures in that column. It has been calculated that about half of the 9.2% thus recorded is tributable to such unavailable documents. Inasmuch as most of these documents are indeed coded d a high percentage are RED or BLUE, the actual percentage of members in the red and blue tegories is significantly higher than recorded in Table 15.

TABLE 15 – PREVENTIVE PROGRAM COLOUR CODING OF SERVICE MEMBERS

Colour Code	Serving Member Sample	Total Forces
Red	72.7%	67.7%
Blue	18.2%	17.4%
Yellow	6.6%	5.7%
Other	2.5%	9.2%
Total	100.0%	100.0%
	n = 532	n = 82,000

ISCUSSION

Samples and the DMF Indices. The 1973 recruit is 0.9 years older than his 1967 counterpart, d that difference has an effect on certain findings (e.g., number of erupted third molars). It also has slight influence on the DMF score, as DMF increases with age.[11] Study A disclosed that the recruits ere "from among the lower socio-economic strata of Canadian society and, as the demographic rvey showed, have little appreciation of the need for dental care". This survey supports that nding.

Treatment Level Index. This is the relation of filled surfaces (i.e., treatment received) to the tal DMF score and as such is a measure of the extent to which a sample has had its treatment quirements met.

The treatment level index for the female recruit was found to be nearly double that of the ma recruit in both of the locations, indicative of the difference in their assessment of the value of dent care; a finding that could be anticipated from clinical experience. This variation may alter t resources required for treatment services should female recruitment be high.

DMF Indices. The significantly higher DMF score of recruits from St Jean (DMF 16.823) compared to the recruits from Cornwallis (14.424) is meaningful. Similarly the difference betwe the total male recruit DMF index of 1966-67 to that of 1973 (14.586 to 15.520) invit consideration. Both observations may be explained through the fact that 40.8% of the 1973 ma recruit sample was from the province of Quebec, (which has a recognized higher caries incidenc whereas only 16.7% of the 1966-67 sample originated in that province. The high score of missi teeth and low number of fillings of the St Jean recruits, when compared to those from Cornwall suggests a reluctance on the part of the St Jean recruit to undergo restoration and to elect extracti or else that there is a tendency for the dentists in their background to extract rather than rest teeth.

Maintenance Care. The annual maintenance of optimal oral health requires 1.99 hours treatment for members of the CF.[1] Studies of maintenance time by other researchers have cited higher requirement. For example, Pelton[13] found that 2.8 hours were required annually to mainta fitness.

Although the maintenance responsibility of the PDP is for a level of oral health that is less th optimal, the time-consuming preventive measures which that program requires are of such order th the 1.99 hours may well be as inadequate allotment for maintenance care.

Furthermore the figure of 1.99 hours, as determined in Study A, is based on a seemingly inva assumption in that the timings allotted for the necessary maintenance procedures were derived fron study of routine incremental treatment and not maintenance treatment. Inasmuch as maintenan care frequently involves placement of single, difficult restorations as opposed to the relatively lar number of restorations that can be placed during one appointment of incremental dental care, appears likely that the expenditure of time per restoration in maintenance care is in excess of th required for incremental care. It follows, therefore, that the 1.99 hour figure may be low and a surv specific to the time required for *maintenance* care appears to be required.

A further possible bias in all treatment timings cited in this study exists in that they are relat to the receipt rather than the delivery of treatment. For any one hour of dental treatment tha patient receives, several man-hours may have been expended by the clinical and laboratory sta Admittedly, a precise determination of such expenditure would be difficult to establish, but t concept must be borne in mind in any evaluation of the resources required to meet a treatme commitment.

Treatment requirements. Dental officers have stated: "We no longer have the number extractions that we once had and there are fewer persons on emergency parade." This observation borne out by the survey. There are 1,532 fewer extractions of erupted teeth required for every 1,0 recruits than there were in 1967, which fact allows more time for restorative dentistry.

The number of recruits with unerupted teeth requiring extraction was also significantly larger 1967 than found in the current study (2,083 vs 785). This finding is believed to be due primarily differences in the study techniques in that:

- The original study considered all unerupted teeth as requiring extraction, whereas the 19 study limited extraction of unerupted teeth to those which were considered to be impact
- A panorex radiograph of each recruit was available only in the 1973 study.
- Inasmuch as the average 1967 recruit was nearly one year younger, it may be concluded th the 1973 recruit had more 3rd molars in place than his 1967 counterpart since third mol erupt at approximately 18 years of age. A similar variation was noted by a study of the den status of Naval recruits in USA.[12]

In order, therefore, to compare the treatment timings established by the two studies, the 19 totals for extraction of unerupted teeth were adjusted to conform with the 1973 findings. T resulted in lowering the previously established treatment time of 8.87 hours to attain optimal o

alth to 7.94 hours. The corresponding 1973 figure is 7.60 hours, a reduction in treatment time of 34 hours.

In addition to the reduced requirement for extractions, the data indicate that less periodontal atment time is required for the 18-21 year old than was previously recorded, despite the fact that ere is considerably greater emphasis placed on periodontia now than there was six years ago. One n only surmise that the examiners believe that these young persons require education rather than atment. Instruction time was not included in the time evaluation of this study.

Treatment required by serving members is also considerably less than in 1967, primarily torations and extractions. The decrease in periodontal treatment is largely compensated for by a corded increase in the need for prophylaxis, plaque control procedures and self-maintenance of riodontal health.

The serving member of 1973 requires 4.39 hours of treatment for optimal oral health. This mpares with 5.93 hours in 1967 and 6.50 in 1960.[1] The increase of fitness thus indicated may be e to:

- motivation provided by the PDP;
- primary prevention gained through the program;
- dental resources are proportionately at a slightly more favourable level than they were because of the reduction in the size of the CF;
- less treatment required for recent recruits;
- improved clinic accommodation and equipment.

Dental Fitness. The acceptance of a fitness level less than optimal is warranted through the role a military force and from a purely practical standpoint. Such acceptance makes it possible to ablish and maintain the great majority of the patient load at a relative "emergency-free" level and idy to fulfil an operational role on short notice. Approximately 70 percent of the CF are now ntally fit and thus available for operational roles. The remaining 30 percent require considerable atment time to bring them to a state of fitness and are those patients who are difficult to find and o do not readily accept dental treatment. Hence, they represent a challenge of some magnitude d for these and other reasons it cannot be assumed that they all will ever be brought to even this s than optimal level.

BLE 16 – TREATMENT TIMINGS – MEMBERS WITH RED CODED RECORDS – 1973

Procedure	Timings for 1,000 Members
am	169.67 hours
diograph	68.09
traction (erupted)	46.43
traction (unerupted)	148.90
nalgam (multiple)	295.03
nalgam (single)	112.14
nthetic	78.68
ay	16.81
own	119.42
idge	1,014.94
pair Bridge	7.09
mplete Denture	45.67
movable Partial Denture	506.25
nture Rebase	17.36
phylaxis	390.00
riodontal Treatment	840.00
ot Canal	16.93
TAL	3,893.47 hours

Looking ahead to the time when the aim of the CFDS can be raised to embrace the concept optimal oral health, Table 16 represents the time required to bring 1,000 red coded serving memb to that level. (See also Table 9.)

Table 16 indicates that the average red-coded member of the CF requires 3.9 hours of treatme to bring him to a state of optimal oral health. However, to more precisely determine the workl involved in bringing the average red-coded member to the higher level it must be taken into accou that this figure of 3.9 hours does not refer to a man who is dentally fit *at this moment.* The "aver member" to whom it *does* refer *was* dentally fit anywhere from 0 to 12 months ago and, since h "average", we can assume he was dentally fit six months ago.

Part of the 3.9 hours of treatment he needs now represents the time required to reaffirm him a level of dental fitness. For lack of timings specific to maintenance of *dental fitness,* the timings maintenance of *optimal oral health* must be applied i.e. 1.99 hours annually. However, *that* fig (1.99 hours) represents the time needed for a man, 12 months after he was assessed as optimally to maintain or reaffirm him at that level.

Since the man represented in Table 16 is assumed to have been dentally fit approximately months before the survey, the percentage of the 3.9 hours of treatment which he requires tha represented by the maintenance factor can, with considerable justification, be cut in half and redu from 1.99 hours to 1.0 hours. Therefore, the treatment time required to bring a *newly crea* red-coded (dentally fit) member to a state of optimal oral health is 2.9 hours. Admittedly t determination contains various assumptions, but it represents a better approximation than heretofore been possible.

The recall system carried out by the CFDS as a part of the PDP involves a time commitm which has not been accounted for in this survey. Similarly the time spent in Phase I of the P which includes plaque control instructions, obtaining plaque indices, topical fluorides and chairs education, has not been determined.

CONCLUSIONS

1. The 1973 recruit is nearly one year older than the 1967 recruit and his general intelligenc higher than his 1967 counterpart.
2. The DMF (T) of the male recruit increased slightly since 1967.
3. Recruits from St Jean have a higher DMF (T) rating that those from Cornwallis.
4. Female recruits have a much higher treatment level index (F/DMF) than male recruits.
5. Cornwallis recruits have a higher treatment level index that St Jean recruits.
6. The DMF (T) of the 1973 serving member is slightly lower than that of his 1967 counterp and his treatment level index has increased slightly.
7. The 1973 recruit requires 7.6 hours of treatment to bring him to a state of optimal oral hea which is 0.34 hours less than his 1967 counterpart.
8. The 1973 serving member requires 4.39 hours of treatment to bring him to a state of opti oral health, which is 1.54 hours less than his 1967 counterpart.
9. The red coded serving member requires 2.9 hours of treatment to bring him to a state optimal oral health.
10. The 1973 serving member received 26 percent more treatment time than did the 1965 serv member.
11. The amount of time devoted to restorative treatment by the CFDS has remained relati constant since 1967.
12. There has been a distinct shift in emphasis among the various types of treatment rendered the CFDS. Fewer extractions are being performed and fewer dentures constructed, whereas number of endodontic procedures and anterior restorations has risen sharply.
13. The value of the PDP as a systemized method through which dental fitness can be attained maintained within the CF is attested to by the findings of this study.
14. The timing of 1.99 hours of treatment per year to maintain a CF member in a state of opti oral health requires verification and/or a determination of time required to maintain de fitness is needed.

5. Timings for the various dental procedures performed during routine incremental dental care as established in Study A are probably low.
6. Treatment timings based on the expenditure of time by dental personnel rather than chair-time for the patient would produce a more realistic baseline.
7. The plaque index as currently established and utilized cannot provide a valid baseline to evaluate the oral hygiene of the CF population.

UMMARY

A study of the dental condition of the Canadian Forces was conducted by means of surveys of ecruits and serving members, and by a review of data from dental records in order to identify hanges in treatment requirements and experience which has occurred since 1967 and, insofar as ose changes relate to the serving members, to qualitatively assess the degree to which the Preventive entistry Program has contributed to those changes.

The average recruit has a higher level of intelligence and is almost a year older than his 1967 ounterpart. A higher percentage of recruits than formerly come from Quebec and, that province eing an area of high caries incidence, this may be the reason that the treatment level index of the urrent new entries into the Canadian Forces is below that reported in other studies of similar age roups. Within the sample this index was higher for females than males and for English speaking than r French speaking recruits. Analysis of DMF indices reveal a significantly higher score for the ecruit population than was reported previously.

Today's new entry requires slightly less dental treatment to bring him to optimal oral health hereas the serving member's requirement for such treatment is significantly reduced from that of he 1967 member. This latter finding is accounted for in part by the demonstrated increase in the mount of dental treatment, per member, that is now provided by the CFDS; the remainder can be ttributed to an increase in primary prevention. Both these increases are considered to be direct esults of the Preventive Dentistry Program which, this study clearly demonstrates, is a delivery ystem through which the Canadian Forces Dental Services are bringing their patients to a higher level f oral health than was previously possible.

CKNOWLEDGEMENT

Sincere appreciation is expressed to Lieutenant Colonel D.H. Hillier CD DDS MPH of the ivision of Dental Services, NDHQ, for his interest and extensive editing of this article.

EFERENCES

. *The dental condition of the Canadian Forces – report of 2 yr study.* Director General of Canadian Forces Dental Services, Ottawa, Canada.
. *The annual report on the preventive dentistry program for the Canadian Forces 1972-73,* Ottawa, Canada.
. *Dental health indices for the Canadian Armed Forces,* Director General of Dental Services, Ottawa, Canada 1967.
. Smith, J.M., *Evaluation of the Navy plaque index,* U.S. Navy Med News Lett 52:19-20, Dec 1968.
. Ramfjord, S.P., *Indices for prevalence and incidence of periodontal disease.* J. Periodont 30:51-59, Jan 1969.
. Podshadley, A.G., Haley, J.W., *A method for evaluating oral hygiene performance.* Public Health Rep 83:259-64, Mar 1968.
. Greene, J.C., Vermillion, J.R., *Oral hygiene index: A method of classifying oral hygiene status.* J.A.D.A., 61:172-179, Aug 1960.
. Greene, J.C., Vermillion, J.R., *The simplified oral hygiene index.* J.A.D.A., 68:7-13, Jan 1964.
. National Centre for Health Statistics. *Selected dental findings in adults.* Public Health Service Publication No. 1000-series 11 – No. 7, Washington DC 20402, Feb 1965.
0. Stamm, J.W., *Dental caries in 506 young Ontario adults.* J. Canad Dent Assn, 5:338-341,1973.
1. National Center for Health Statistics. *Decayed, missing and filled teeth in adults.* Public Health Service Publication No. 1000-series 11 – No. 23, Washington, DC 20402. Feb 1967.
2. Rovelstad, G.H., et al, *Survey of dental health of the naval recruit. 1. Status of dental health.* J.A.D.A. 58:60-68, May 1959.
3. Pelton, W.J., Pennell, E.H. *Predictability of dental care needs of adults.* J.A.D.A. 52:703-708, Jun 1956.

CADET LEAGUES EXPRESS APPRECIATION

Prior to commencing detailed planning of this year's preventive dentistry program for the 15,000 cadets attending summer camps throughout Canada, a letter was sent to the three sponsoring organizations which control cadet activities. The letter outlined our past activities in this regard and solicited support of the program. It read, in part, as follows:

Each summer for the past few years the Canadian Forces Dental Services have conducted a Preventive Dentistry Program for all service cadets attending summer camps. The program has been given in addition to the emergency dental care normally provided for the cadets.

The approach to dental health is preventive and educational in nature and is similar to the program offered to Regular Force members. It has been well received by both cadets and instructors, with 15,566 participants in 1972 and 15,440 in 1973.

It is proposed to conduct a similar program in the summer of 1974 and therefore it is desired to have the concurrence of the cadet leagues.

Responses were so gratifying that we take this opportunity to pass them on to those who have expended so much time and effort on the program.

On behalf of the Navy Cadet League of Canada, the General Manager, W.J. Hodge wrote in part:

... we wish to commend you for this most important program and to recommend the continuation of the program in future years.

His counterpart for the Army Cadet League of Canada, W.J. Brown expressed that organization's sentiments as:

The Army Cadet League of Canada is aware of your program and endorses it fully. You have our full concurrence in continuing the program, and if we can assist in publicizing your efforts, we would be pleased to do so.

Arthur Macdonald, their Executive Director, confirmed the approval of the Air Cadet League of Canada in this manner:

The Air Cadet League of Canada extends appreciation to the Canadian Forces Dental Services for conducting this program and we hope that it will be continued at future Air Cadet summer camps.

TWELFTH ANNUAL CFDS BONSPIEL

This year's bonspiel was another success for the CFDS thanks to the participation of approximately 200 serving members, former members and associates. Esprit-de-corps was notable throughout the competition, with many old friends reunited and other friendships started by Thursday evening, when forty teams assembled in Borden for the opening festivities.

The curling began early Friday morning and, when the keen competition drew to a close Saturday night, the Wansbrough winners were again the fellows from B.C. - Capts Jim Fennell, Don Graham, Barry Kendell and Doug Watson. "B" Event went to John Clint and crew from Eastern Ontario, while "C" Event was won by "Sec" Kennedy and rink from the University of Western Ontario.

The wind-up party on Saturday precipitated an unrestrained expression of Corps comradeship, with everyone joining in the easy banter handed out by our "star" rink and other notable jokesters. A new dimension was added to this year's bonspiel in the presentation of a two-piece trophy. The horse's head, for the best unit-showing in the bonspiel, was won by 11 Dental Unit. Our four generals, who curled together for the first time and represented the Division in Ottawa, were awarded the other end of the trophy. They failed to make the finals and thus had the poorest record. A special word of thanks goes to Dr Andy Andrews for his donation towards the new trophy which he obviously enjoyed presenting, particularly the part which went to his former bosses.

To those on staff at CFDSS who helped in so many ways, the entire CFDS owes

ts thanks. Thanks also go out to all articipants, for without curlers we wouldn't have had the fine bonspiel we all enjoyed this year.

1. "A" Event won by Capts Fennell, raham, Kendell and Watson. Trophy pre- ented by BGen Baird (retired).

2. "B" Event won by Mr J Clint, Mr R oodwin, Sgts Danyluck and Hope. Trophy resented by BGen Craigie.

3. "C" Event won by Mr F Kennedy, Mr Batten, 2Lt Button and Capt Pollock. rophy presented by CWO Morris (on left).

4. "Horse's Ass" Trophy won by the Four Stars" - BGens Baird, Kearney, vans and Craigie. Presented by LCol A ndrews (retired).

5. "Horse's Head". LCol Taylor accept- ng trophy for 11 Dental Unit.

1~2 MARCH

C.F. DENTAL SERVICES SCHOOL NEWS

by Chief Warrant Officer W.D. Morris, CD

OINGS AND COMINGS

Members of our staff have spent a busy inter on temporary duty assignments in upport of the accreditation program of he Canadian Dental Association Council n Education. Col Richardson, LCol Reyolds, Maj Morley, Capt Haines, CWO Mconald and Sgt Albertson all took one r more trips to evaluate the dental rograms at such various locations as elowna; the Nova Scotia Institute of echnology, Halifax; Holland College, harlottetown; Kelsey Institute, Sasktoon; Confederation College, Thunder ay; and Canadore College, North Bay.

As a counterbalance to all this sporting around the country by our personnel we have welcomed numerous visitors to the School. Col Thompson from Trenton was the principal instructor for the Officers Clinical Course and was supported by guest lecturers Dr Andy Andrews from Oakville, LCol Turcotte from Valcartier and Dr PT Smylski from Toronto. Other recent visitors were CDHA and ODHA Presidents Mrs S Clark and Mrs R Atkins who were guest lecturers to the Dental Therapist PL6B Course.

I DENTAL UNIT NEWS

by Sergeant MY Fletcher, CD

HE SERVICE LOOKS AT PREVENTION

Such was the topic of their presentaon when, during the afternoon session f the Ottawa Dental Society meeting in arch, LCol Chatwin, Maj Marcil, WO King nd Sgt Fletcher combined forces to proide the large turnout of civilian dentsts with some insight of our current ctivity in preventive dentistry, the se of the Plaque Index and the preventon of periodontal disease. Of particulr interest to the many former members f "The Corps" was the modern ADEC field quipment now used in our dental servces - a far cry from the old field-chair nd A-Kit.

OMEN'S LIB?

Sgt Donna Hollins was selected to atend a two-week drill instructors course n February. Donna reports that the folow-up wine and cheese party was the ight antidote for all those blisters nd aching muscles.

ANDY SOUGHT

A farewell luncheon was held to honour gt Sandy Kirley on her release from the F - but where was the guest of honour?? h well Sandy, from all of us goodbye, ood luck and may ye fare well.

T AIN'T FAIR!

Ms Mary Ellen Jensen, who is half-way hrough her dental hygienist course,may have to study, but that didn't stop her husband Al and their two boys taking a break from household duties to catch two weeks of golfing and sun in Florida. Oh well, Mum, guess you'll have to wait for next year.

LADY IN WAITING

WO June Patterson was presented with a baby's high chair by the NDHQ clinic staff. June is busy at home these days playing that "waiting game".

TD TRIPS

MCpl Lyall Kallman was back to CDLS (London) once again in February. Lyall reports that "installations of equipment in the relocated clinic are now completed". Translated, that means: "Guess that just about takes care of everything I wanted to see in London".

GETTING AWAY FROM IT ALL

When Mother Nature promised us an early spring, Maj Yvon Cyrenne and his wife Marie were not to be denied their skiing. They promptly left for the French Alps where they enjoyed perfect skiing conditions ... WO Henry King and family decided that Florida was the place to go to beat the winter woes, as did Thelma Jewers and husband Tony, as did Trudy McNamee and husband Harold ... Capt Bob Bowes and wife Dibby returned from a trip to India with many interesting

photos and enthusiastic comments ...Capt Myron Cherun and wife Marlene decided to savour the Mexican sun and spent two weeks at Acapulco.

Bob and Dibby Bowes and acquaintances

CFB CHILLIWACK AWARD

MWO McFadden presents Cpl Cudmore with a certificate of service from the CFB Chilliwack Community Council where Wayne served as a Councillor prior to his posting to Ottawa.

CURLING

Sgt Ethel Snippa was a member of the 2nd place team for the Women's National Curling event held in March ... The annual Ottawa/Petawawa Bonspiel was once again a day of good fun and rivalry. It was only fitting that Petawawa, being the host team, should take back the horse's *derriere* and this they obligingly did.

THE HORSE'S DERRIERE AND ACQUAINTANCES. (LtoR) Front row: CWO Lawson, Sgt Dumas, Sgt Tremblay, Maj Cyrenne, WO Clarke, MWO Sullivan, Mrs Sullivan, Sgt Hollins, LCol Windsor. Middle row: Sgt Sabine-Paisley, WO King, MWO McFadden, Cpl Duffield, Mrs Marion, Maj Marion, WO James, Cpl Bosnell, Cpl Lambert, Cpl Clarke. Back row: WO McPhee, MCpl Kallman, Capt Charlebois, Lt Lamontagne, Cpl Kossakowski, WO Wadden, Maj Fisk, Cpl Brosha, Cpl Thompson, Maj Gunther, MWO Jones, Sgt Gardiner, Cpl Christenson.

DGDS INSPECTION, 1 DENTAL UNIT. *(AFTER THE LUNCHEON BUT BEFORE THE CRITIQUE.)* *(LtoR) Maj Marcil, Maj Cyrenne, Capt Charlebois, LCol Chatwin, Capt Boulanger, BGen Craigie, Capt Bowes, LCol MacDonald, Capt Rowat, Maj Gunther.*

11 DENTAL UNIT NEWS

by Sergeant R.W. Boyd, CD

ADQUARTERS

LCol Taylor is back in the shop after tending the 2nd phase of his French nguage course. He says he thoroughly joyed the course and is anxiously aiting the 3rd phase.

NOVATIONS

Word has been received that $60,000 s been approved for renovations to e HQ Building which will include a w laboratory, a Preventive Dentistry ntre and facilities for the dental uipment repair technician.

The expansion of the Comox clinic has most been completed and, after a rath- chaotic winter of no heat, interrupt- electrical power and constant con- ruction noises, the staff will be hap- to return to normal routine.

MPOSIUM

Ninety-two dentists with civilian and litary practices throughout British lumbia gathered recently at CFB Es- imalt to attend the Second Annual Den- l Care Symposium sponsored by the ctoria Dental Society and 11 Dental it.

The group was welcomed by Capt (N) yes, the Base Commander. The pro- sional program got under way with a vely presentation by Dr Ron Jordan, ad of the Department of Restorative ntistry at the University of Western tario. His topics were: *Acid etch- g and its use with anterior composite restorations; pit and fissure sealants; management of deep carious lesions using indirect pulp capping techniques; and, a comparison of amalgam alloys.*

Dr Jordan surprised many of his audience by presenting evidence that Sevriton used with the acid etching technique is superior to the composite filling materials. He also proposed that Dispersalloy was superior to other amalgam alloys.

Following this interesting presentation, the meeting was moved to Work Point Barracks Officers' Mess where table clinics on numerous subjects were presented by various members of the Victoria Dental Society.

The group later enjoyed cocktails and a five-course Mess dinner. One of the highlights of the dinner was an illuminous drum display, conducted in total darkness by the 3 PPCLI Corps of Drums. This entertainment was followed by the traditional salute to the band by LCol A Taylor, who drank two ounces of straight rum from a silver goblet.

It was the unanimous opinion of those who participated in the Symposium that it had all been a tremendous success and we look forward to enjoying similar professional and social activity during next year's meeting.

SPORTS

Cpl Duncan skipped a servicewomen's curling team to second place at CFB Winnipeg in the zone championships ... Cpl

Creelman competed in the Zone 1 service-women's badminton tournament held at CFB Esquimalt 28-29 Jan. She captured 2nd place in the singles event and, with her partner, took 1st place in the doubles ... Maj Graham entered the men's curling playdowns in Richmond in January, winning one game and losing two. Later that month he placed third in the second event in a bonspiel in Hope ... Capt Fennell skipped his mixed team into the Island finals played on the weekend of 15 Feb.

The rink skipped by Capt Fennell won the CFDS Bonspiel "A" Event for the second consecutive year. The CWO Greco team caught the 3rd prize in "C" Event. As a result of this unit success and the fact that 11 Dental Unit fielded 17 curlers and one observer, the Commanding Officer, LCol Taylor was presented the "head" of a two-part "horse" trophy. Those who contributed to our winning the west end of the west-bound horse report they had an excellent time and no serious casualties during a most enjoyable bonspiel.

A unit fishing derby was held in February. Sgt Gratton landed the largest salmon and Capt Hansen won a prize for the most salmon caught. LCol Harrington came into the money for landing the largest non-salmon. To spare envy on the part of our out-of-province readers we will not reveal the numbers and weights of the catch.

12 DENTAL UNIT NEWS

by Captain D.E. Fraser

GOODBYE HAROLD
GOODBYE HAROLD

On 28 February local unit members gathered in the Windsor Park Community Centre to bid farewell to MWO Harold Kirby and Sgt Harold Roberts on the occasion of their retirement from the CFDS and the Canadian Forces. A mixed party is planned later to honour these members for their long and devoted service.

A WINNER AND A LOSER

Cpl Baird, dental assistant at CFB Gander won the beard growing contest during that station's winter carnival in February. He was also a member of the team which captured the Carnival broomball championship for the Corporals' Club. Not to be outdone, the station dental officer, Capt Moore reports he helped the Officers Mess lose the beer drinking, volleyball and broomball contests!

TERRY TAKES A TRIP

Although relocating one's household a mere hundred miles away is usually a fairly simple procedure, MWO Therrien found his move from Chatham to Gagetown both complicated and upsetting. The problems began when the moving company smashed an aquarium, lost some of his fish, broke his clothes dryer and killed a cat! As a result, Terry spent the first weekend feeding fish in Oromocto, while his wife fed their children in Chatham. Both parts of the family were in motels as it was uncertain exactly where the furniture was located at the time. Terry is convinced that all this resulted from a mid-winter move and is most grateful that it wasn't transcontinental!

FAMILIARIZATION COURSE HELD

On 11 January a one-day course was presented by the staff of the Dockyard dental clinic to 19 medical assistants attached to ships. These tradesmen received instruction in preventive and

WO Peverill being "gonged" with the CD by Maj Gray

nergency procedures and in document isposal. The course was well received nd WO Dawson reports that the ships' ersonnel now have a better understand-ng of dental objectives.

DENT Os GATHER

The Base Dental Officers of 12 Dental nit travelled to CFB Halifax for their nference 7-8 February and all concern-l demonstrated ingenuity, know-how and nsiderable luck to arrive in snow-ound Halifax on time for the first ound of discussions. During the suc-essful gathering, the delegates were sted by Col and Mrs Protheroe. For ose unfortunates who have never sted Mrs Protheroe's delicious cook-ng the B Dent Os feel sorry.

ABLE CLINICS AT DALHOUSIE

Col Protheroe, LCol Houde, Maj Jolly, aj Andrews, Capt Valois and Capt Fraser sited the table clinic exhibition at alhousie University on 13 February. The ird year dental students and the dent-hygienist students were responsible r the clinic presentations. 2Lts Le-anc and Cormier demonstrated their ilities while Mrs Maillet - the wife 2Lt Maillet, a fourth year student - s a member of the hygienist duo who n first prize for their display.

WINTER'S TALE

Maj Klaus Buchholz recently spent a ight sleeping on the couch. It all tarted when he left the clinic in mid-fternoon, because of a severe snow-torm, and started out to pick up his wo sons at high school. Klaus soon iscovered that traffic was backed up n all streets and, as the snow intens-fied, stalled and abandoned cars made t impossible to travel homeward. Five ours after his departure from the clin-c, Klaus arrived back at his starting oint, after travelling only two miles nd idling for a full tank of gas. He pent the night sleeping in his office, ithout company or blankets. Rumour as it that on seeing a snowflake fall, aj Buchholz now heads for home.

HE MURRAYS IN REVUE

Capt Cliff Murray and his wife Glenda ere singing and dancing for charity in alifax during the first week in Febru-ry. They were in the cast of a musical evue that raised more than $12,000 for

the Junior League of Halifax's Community Trust Fund. Both of them were exhausted but happy following a month of hard work.

TEMPORARY DUTY

Capt Hudgins and Sgt Thorburn, who was replaced by Sgt Mackie, recently spent four weeks in Puerto Rico providing dental services for fleet personnel on Exercise Squadex. They were working in the USN clinic at Roosevelt Roads and Capt Hudgins reports that he received a great deal of assistance and hospitality from USN dental personnel. The dental team has now joined HMCS Preserver and are headed for Haiti where the dental and medical teams have been requested to do some examinations.

12 Dental Unit HQ Staff (well, most of 'em - Sgt McMurtry the chief clerk and Sgt Longford, senior DEMT, are missing). Seated: Mrs MacLean, our steno; standing: Capt Fraser, AO, Col Protheroe, CO, MCpl Shave, DEMT.

SPORTS IN BRIEF

Majs Bill Gray and Daryl Brown were on opposing teams in the British Consol curling playdowns to represent Nova Scotia in the National Championship ... Maj Gray, Capt Bullock, Sgt Whynott and an unidentified curler were involved in the Branch Junior playdowns at Liverpool N.S. 12-14 February ... Capt Bradley of CFB Cornwallis played hockey in the zone finals at CFB Gagetown 17-21 February ... LCol "Crusher" Brogan scored a goal in an "Old Timers" hockey game between Base Gagetown and the Town of Oromocto ... Cpl Deon "Foxy" Allen was half of the Base Doubles Badminton Champions and represented CFB Gagetown at CFB Halifax in the regional championships ... Scott Murray, 15-year old son of Capt and Mrs Murray recently won six of seven events to become the Nova Scotia High School Gymnastic Champion. Scott is now on the Nova Scotia Canada Games Gymnastic Team, and will be busy during the coming summer participating in various gymnastic events throughout Canada.

BONSPIEL A CINCH FOR HINCH. Some arrived in private cars, some even in a not so private helicopter, but the majority were aboard the bus from Halifax as, during the afternoon of the last day of January, forty-five curlers arrived in Cornwallis for the fourth unit annual bonspiel. It turned out that those who rode the bus had the most interesting ride since rumour has it that that vehicle made several unscheduled stops en route, including one at the main gate of Cornwallis, where a 20-foot telephone pole was sheared off at the ground. Occupants of the bus will be interested to know that the mate of the pole in question has since been removed by more scientific methods.

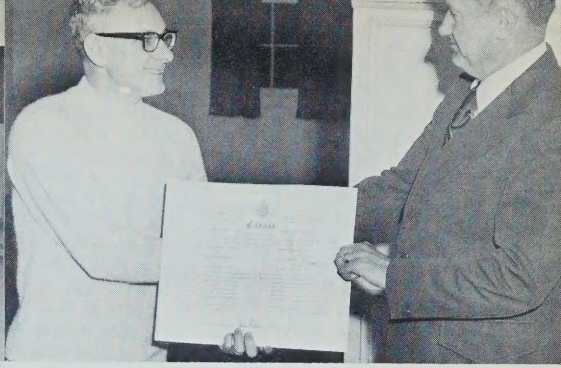
For the first time the bonspiel received outside support. The Ash Temple Company donated a trophy to the winner of the first event, which was presented by Jack Mullins, a member of that company and who, ironically enough, was on the winning team. Another donation was made by LCol Cliff Smith of Ayerst Ltd.

Top. "A" Event winners were skipped to victory by Maj Art Hinch (ret'd). Team members were Capt Jack Mullins (ret'd), Maj Jim Jolly and Maj Noel Andrews. Jack Mullins presented the "Prophy Trophy" on behalf of Ash Temple.

Middle. For the first time in four years Sgt Phil Whynott dropped from "A" Event. Phil is shown receiving the "B" Event trophy from Col Protheroe. Assisting Phil to victory were Capt Clay Bullock, Cpl Buck Buchanan and Capt Henry Ferber.

Bottom. The "C" Event was won by a Med/Dent foursome. Col Protheroe presented the trophy for this event to MWO Stu Brown while Cpl Chuck Schnare, CWO Ray Barrett and MWO Stan MacLean look on

Col Protheroe throws the first rock to en the Fourth Annual 12 Unit Bonspiel. ol MacDonald and Sgt Whynott are pre- red to sweep while the unit curlers tch to see how it's done.



During the presentation dinner which followed the bonspiel, Col Protheroe took the opportunity to present CWO Ray Barrett with his Chief Warrant Officer scroll.

13 DENTAL UNIT NEWS

by Lieutenant J.W. Shore, CD

NADIAN PENITENTIARY SERVICE

Sgt NJ Hope of the Kingston Detachment cently organized a competition to sel- t a senior laboratory supervisor for e Regional Dental Laboratory of the nadian Penitentiary Service. In Oct- er of last year, Norm conducted a sim- ar evaluation for the Solicitor Gen- al's department with respect to tech- cians at the junior level. The init- tive and efficiency he has displayed these undertakings is commendable.

DDLE EAST

Sgt NL Highfield, Trenton Detachment, turned from his tour of duty in the ddle East on 13 Feb. Nelson enjoyed s tour immensely and now has a good llection of "war stories" to relate. Sgt JD Cormie from Trenton has been lected to contribute his laboratory ills to the efforts of the Canadian ace Keeping Force in the Middle East. ug departs in mid-April and at present engaged in instructing his wife Barb- a how to operate the family car. Good ck on both counts, Doug.

RTH BAY WINTER CARNIVAL QUEEN

The CFB North Bay Winter Carnival was ld 19-23 February. Various members the dental detachment and their de- ndants were engaged in numerous act- ities which contributed much to the ccess of this event. Margaret, the fe of Sgt P Bosch, was selected as e Carnival Queen.

AU REVOIR

Three of our officers are taking their releases on completion of their obliga- tion to the Canadian Forces. Capt RJ Burns of the Toronto detachment will be setting up practice in Brockville while Capt GE Rocque of Petawawa plans to accept an associateship in the Pembroke area and Capt DB Smith of Trenton will be offering his services to civilians in Belleville. We wish them every suc- cess as we do Cpl MR Ellsworth who was formerly at our Toronto clinic and re- cently took her release to better pur- sue her role as a wife and mother.

WO JE Clarke is presented with his first clasp to the CD by LCol GE Windsor, Base Dental Officer, Petawawa.

London Dental Detachment. Seated: Capt RPE Alberti, Maj L Dombowski. Standing: Sgt RM Haiplik, Sgt JR Ritchie.

RMC Kingston Dental Detachment. Miss T Moore, MCpl JE Thompson and Capt HA Chestnut.

14 DENTAL UNIT NEWS

by Sergeant A. Gray, CD

VISIT

Cpl B Hansen, BGen Craigie and Maj JL McNeill discuss a (finger) point during the DGDS's recent visit to Moose Jaw.

AWARDS

Sgt NC Petersen being presented with the Clasp to the CD by Col RH Annis, CFB Moose Jaw base commander. Norm's career has been long and varied and includes tours aboard two aircraft carriers, the MAGNIFICENT and the BONAVENTURE.

ORTS

Cold Lake detachment has formed a clin- physical fitness club under the lead- ship of Sgt John Walker. The club ets three to five times a week at the mnasium where they participate in ex- cises, finishing off with a two-mile n. This should help bolster their aim to being the most physically fit inic in the CFDS ... The *MEDLEY MOLARS* ckey team were challenged in January the Cold Lake IS&IE Lab team. With eir propensity for filling every cav- y they see, it was no surprise when r boys won the game by a resounding to 5 score ... Serving and retired

Dental Corps personnel and their wives participated in the Edmonton detachment annual mixed bonspiel in the Namao Curling Club on 23 February. A total of 14 rinks from Edmonton, Cold Lake and Calgary curled. The Garth C Evans Trophy for "A" Event winners was taken by the Jack Fraser rink from Cold Lake with the Dr Singer Trophy for "B" Event going to Gordon Huff's rink, also from Cold Lake and skipped by Harry Ayerst. *(Without going as far as intimating that another government department was responsible, it is regretted that photographs of this historic event were lost in the mail. ... Editor)*

15 DENTAL UNIT NEWS

by Lieutenant M. Gelinas

LON CAREER SHOW

A Salon Career Show was held at Place naventure in Montreal in early Febru- y as part of a recruiting drive. The jective was to present career opport- ities to students at various levels. j Nadeau coordinated CFDS participat- n, and four dental officers with four inical assistants manned our display. th regard to its success in terms of cruiting, only time will tell.

ORTS

Capt Y Ayotte sparked the CMR Officers ss hockey team to victory in a recent me against the Base Valcartier offic- s ... Capt N Roy participated in the Quebec Region badminton playdowns in March.

THIRD ANNUAL BONSPIEL. Six rinks took part in our annual unit bonspiel held at St Hubert on 4 February. Once again the competition became a "grudge match" between LCol Begin's rink from St Jean and Matt Hall's rink from Unit Supply. The St Jean rink carried off the honours. It's easy to see who gets the most practice.

Left. Participants in 15 Dental Unit third annual bonspiel.

Right. The winning rink: Capt Roy, third; LCol Begin, skip; Capt Ayotte, lead; Capt Larose, second.

35 FIELD DENTAL UNIT NEWS

by Sergeant B.F. Hannay, CD

TEMPORARY DUTY

Capt M Bouris and MCpl T James spent a week in late November providing dental treatment to personnel in Prestwick, Scotland. It was a very rewarding trip in terms of both work and sightseeing. A portion of the latter is depicted in the photograph.

FIELD TRAINING

Dental treatment was provided during Exercise Grafenwohr, 9 Jan-15 Feb by Capts Bouris, Graham and Greenacre who were assisted by Sgt Bernier, MCpl James and Cpl Bowering.

SPEED RESTRICTIONS

Speed restrictions in Germany were lifted in March. Once again there is no speed limit on the autobahns and on other major roads you can proceed legally up to 62 miles per hour.

DENTAL DETACHMENT CYPRUS NEWS

by Sergeant D.W. Griffit

FAREWELL TO THE ISLAND OF LOVE

The winter sojourn on the "Sunny Isle" is drawing to an end for Capt DM Spencer, Sgt Ron Lindsay and Sgt Dave Griffiths. The tour included much hard work as evidenced by the numerous patients rotating back to Canada with shiny new fillings and prosthetic appliances.

On the lighter side, the staff have participated in many activities that will make for fond memories. Pictured is the No. 1 Cavity Assault Team in readiness to do their after-hours thing. Sgt Ron "Flipper" Lindsay is looking for a puddle in order to test his equipment before trying the "Blue Med", Capt Spencer is still looking for a challenger worthy of his time and effort on the tennis courts and Sgt "Tiny" Griffiths is trying to get rid of the ball, in addition to some unwanted extra calories. All three partook in various sports and other activities during their tour and, in this way, made many new acquaintances including those from other contingents serving on the island.

Now it is time to say farewell to the "Island of Love" as Capt Spencer retur to CFB Gagetown, Sgt Lindsay to Ottawa and Sgt Griffiths to Winnipeg. We all wish the new team of Capt Paul Lavalle Sgt Earl Borden and Sgt Ed Barnes a hearty welcome and hope that they enjo themselves as much as we have during our six month tenure.

"PINKIE" REPORTS

A recent report from Capt FJ Marentette late of CFDSS), whose mailing address s now Camp Shams, Cairo, relates how he first rotation is making out. He rites in part:

"The whole adventure had a rather haky beginning with a 3½ hour bus trip rom St Hubert to Uplands. We approach- d Cairo at approximately 1800 hrs and ll was in darkness - no lights except n the Camp Shams complex which is gen- rator-supplied. We circled in a hold- ng pattern for an agonizing 45 minutes, t the end of which the pilot finally dvised us we couldn't land and were en- oute back to Lahr. Our eventual arriv- l at the airport in Cairo was unevent- ul. We immediately boarded Polish rucks and were whisked away to Camp hams. Being the first rotation draft f "pinkies", we were greeted by much ustle and bustle, cheering, hand-shak- ng and the like. Those people whom we ere replacing boarded the same vehicles nd left for their trip home on the same ircraft. Consequently I've never had n official handover.

As far as living conditions are con- erned, I've never had it so good in he "boonies" or on exercise. Conditions re better than they were for me in yprus in '64. We have a superb Food ervices staff and rations, an excellent elfare, Canex and tours program, pass- ble accommodation in tents and good ilms from Canada.

There's only one gloomy prospect. We re probably going to move to Ismailia y June to a former RAF camp. I was on recce there two days last week to stablish Adm Coy accommodation, and the eneral conditions leave much to be de- ired. All in all, though, it's a good our."

* * *

Capt J Lemieux, a charter member of our etachment in the Middle East, expresses is reaction to his tour there in the ollowing manner.

"J'ai bien aimé l'étape commune d'in- truction militaire il y a quelques nnées, mais je ne voudrais pas la re- ommencer. Il en est de même pour mon éjour en Egypte. C'est pour moi une expérience formidable, mais j'espère ne la vivre qu'une seule fois.

Tout ce qui nous apparaissait très difficile au début est devenu une routine acceptable après quelques semaines; comme la poussière, les nuits fraîches, le sac de couchage, se faire la barbe en plein air le matin dans un bassin d'eau, la gourde comme seule source d'eau courante, les toilettes à ciel ouvert, etc.- tout cela nous apparaît normal après quelque temps. Il est à noter que nous sommes heureux de revenir au camp après quelques jours de congé afin d'y retrouver nos bons repas canadiens et nos douches "super chaudes". De fait, nous les Canadiens vivons plus confortablement que la majorité des gens du pays même si nous vivons sous la tente.

Si nous allons en ville, partout nous sommes bien accueillis. Les Egyptiens nous estiment au plus haut point et ce n'est pas seulement pour notre argent car si nous nous montrons intéressés à eux et que nous essayons de dire quelques mots en arabe ils sont prêts à tout nous donner même s'ils ne possèdent que très peu. Ils sont offusqués si on n'accepte pas leur thé ou leur bière Stella; d'ailleurs il vaut mieux accepter car les deux sont très acceptables.

Ici la vie peut être monotone si on se contente de manger, dormir, faire son travail quotidien, regarder les films présentés chaque soir au mess des officiers. Par contre si on a l'occasion de se trouver des divertissements à l'extérieur du camp la vie devient plus agréable. Par exemple, dans le domaine du sport, j'ai quelquefois sur semaine l'occasion de jouer au tennis au "Gézirah Sporting Club" sur l'île située dans le Nil en plein centre du Cairo. Il y a aussi les voyages; avec une autorisation de congé mensuel de 48 heures il est possible de visiter des centres touristiques tels que Luxor où sont situés la Vallée des Rois et le temple de Karnak ou encore le barrage d'Assouan connu à travers le monde. Ces endroite sont à ne pas manquer pour qui vient vivre ici. Bien sûr les pyramides et le sphinx sont très près de nous et nous pouvons y aller toutes les fins de semaine si nous le désirons. L'endroit est idéal pour faire de l'équitation dans le désert; une balade peut durer

cinq heures et nous permet d'aller prendre une bière à "Sahara City" pendant que les chevaux reprennent leur souffle. Le décor est unique à travers les dunes de sable éclairées par un soleil égyptien bien différent de celui qu'on a au Canada.

Aussi, Alexandrie, Suez, Ismaîlia et Port-Saîd sont d'autres endroits intéressants à visiter et il est possible de s'y rendre tout en étant de service puisqu'il est permis de visiter les autres détachments canadiens qui s'y trouvent pour vérifier la condition d'hygiène dentaire des militaires.

Faire partie de la première équipe dentaire à travailler sous la tente est une expérience unique. Mais de plus nous vivons avec l'équipe méedicale à laquelle nous nous rapportons pour la première fois depuis que le service dentaire des forces armées existe; nos relations sont excellentes et très enrichissantes.

Nous avons maintenant autant de patients des contingents étrangers que de Canadiens et notre première constation est que nous, Canadiens, sommes les plus avancés au point de vue de prévention et traitement; la condition dentaire de nos Canadiens se révèle supérieure dans son ensemble. Je compare no Canadiens aux patients qui ont passé à la clinique dentaire nous venant des contingents finlandais, autrichiens, indonésiens, suédois, polonais, irlandais, sénégalais, ghanéens et népalais.

Enfin, pour un dentiste canadien errant, l'Egypte ce n'est pas si mal!"

1 DENTAL EQUIPMENT DEPOT NEWS

by Lieutenant J.J.L. Lamontagne, CD

VISITS

Maj Fisk and CWO Lawson, in Borden recently, made final arrangements for 1DED to assume the accounting of dental materiel for the CFDSS. Good timing of the visit allowed them to stay on to enjoy the CFDS Bonspiel ... In March MWO Everett and Cpl Duffield spent an afternoon at St Joseph Rural Apostolate in Combermere (near Barry's Bay, Ontario) where they instructed the maintenance staff on the installation and maintenance of a complete two-chair clinic, donated to St Joseph's by a Toronto dental supply company.

FOREWARNED IS FORE-ARMED

Maj Fisk has announced that he plans to retire this summer. Exact date is not yet known.

SPORTS

Cpl AM Wilson, manager, and the Petawawa Atom All-Stars travelled to Sarnia to compete in the Silver Stick Tournament. They won the Silver Stick (North America Champs) for the Class Three Atoms ... The 1 DED annual ice fishing derby was held 22 February. The weathe was mild and (ho hum) there isn't much else to add except that Lt Lamontagne won first prize for catching the one an only fish (in the lake?) ... Maj Fisk curled in Ottawa 18 January in the British Consols Division II playdowns. He also entered a rink in the Centennial Plus Seven Bonspiel held in Petawawa recently, where he lost the finals of the "A" Event to a rink from Ottawa. He fared better, however, in the Deep River Men's Open on the weekend of 8-10 March With Lt Lamontagne as lead, the combination proved successful in the "B" Event ... Personnel at 1 DED underwent the semi-annual PT test (Aerobics) in February. All of those eligible to run passed with a "good" rating.

DENTAL SERVICES NDHQ NEWS

DIRECTOR OF DENTAL TREATMENT SERVICES

The promotion of Colonel John C. Brick to that rank became effective on the first of March this year and his numerous friends extend their best wishes on achieving this well-deserved

:cognition of his outstanding qualit-
:s for leadership.
Following wartime service as an offi-
:r with the Essex Scottish Regiment,
:l Brick returned to the University of
:ronto where he received his Doctorate
1949. His career with the dental
:rvices, which embraces the intervening
:ars, has been a distinguished one and
:s more recent appointments include
:at of Commanding Officer 35 Field Den-
:l Unit in Europe and his current posi-
:on as director of Dental Treatment
:rvices in Ottawa.
As a corollary to his early experience
:th the "Fighting Arms" and his sust-
:ned interest in the martial arts, Col
:ick has developed considerable exper-
:se in the field of small arms of all
:pes and possesses an extensive lib-
:ry on the subject as well as a sizable
:llection of historic weapons. By no
:ans a mere scholar of these subjects,
:l Brick is also a skilled marksman,
:d on several occasions has represented
:nada at Bisley and in other inter-
:tional competitions.

Professional Training

LHOUSIE UNIVERSITY

Periodontia, 25-26 January
Maj GD Petrie, Capt JE Lavalee

Endodontia, 16-17 February
Capt WO Donald, Capt JP Levy

NAVAL GRADUATE DENTAL SCHOOL

Removable Partial Dentures, 21-25 Jan
Maj FC Arpin

LTER REED ARMY MEDICAL CENTER

Oral Pathology, 4-8 March
Capt DM Moore

TTERMAN ARMY MEDICAL CENTER

Postgrad. Periodontics, 25 Feb-1 Mar
LCol JJH Wright

Canadian Forces Training

CF DENTAL SERVICES SCHOOL

Oral Surgery, 23 Jan- 6 Feb
Maj R Carver, Capts FV Jackson, DF Clark, DA Meredith, JR St Louis, F Giesbrecht

Dental Therapist PL6B, 9 Jan-26 Jun
Mrs M Jensen, Sgts H Kalmet, HB Clifton, DW Mason, A Busse

Dental Clinical Assistant PL6A, 9 Jan- 6 Feb
Sgt I Winsor, MCpls EF Barnes, JL Pouliot, RA Gayler, TA James, VG Frank, MFF Audet, Cpls FN Boosamra, CJ Rheault, JP Chasse, MM Kent

Dental Clinical Assistant PL3 6 Mar - 10 May
MCpls JJR Jobin, RA Portuondo, WD

Jackson, NA McLeod, REF Christiansen, Cpls RR Kossakowski, JAR Neveau, WE Blackley, JGL Girard, LE Petley, JOJP Laperle, KA Bosnell, JW Christensen, BH Davis, JR Levesque, Ptes JGN Moir, TC Rocco

CF SCHOOL OF MANAGEMENT (ARNPRIOR)

Middle Management, 18 Mar-5 Apr
Capt WO Donald

CF SCHOOL OF INSTRUCTIONAL TECHNIQUE

Instructional Technique 1
Capt RS Haines, *7-23 January*
MWO EMB Everett, *17 Mar-5 Apr*

Instructional Technique 4
MWO R Todd, *18-29 Mar*

CF STAFF SCHOOL

Junior Staff Course, 6 Feb-12 Apr
Capt JG Chagnon

CFB BORDEN

Base Defence Duties, 14-25 Jan
Cpl GG Bowser

CFB PETAWAWA (2 CBT GP SIG SQN)

Winter Indoctrination, 7-18 Jan
Capt PD Higgins

Training with Industry

TICONIUM COMPANY, ALBANY NY

Advanced Ticonium Techniques 17-22 Feb
CWO KE Laurence, MWOs EE McFadden, DC Hughes, Sgt H Marckwort

Promotions

Colonel: JC Brick

Major: MF Pilon, KR Morley

Warrant Officer: MJ Hall

Sergeant: EF Barnes, I Winsor, MG Williams, JE Fréchette, GG Hildebrandt

Master Corporal: JE Thomson, GC Beaulieu, CM Martell, JP Oakley, L Petkow-Awromow

Corporal: JG Bernier, JE Genest, PD Young, LC Martyn

Honors and Awards

FIRST CLASP, CANADIAN FORCES DECORATION
WO JE Clarke, Sgt NC Petersen

CANADIAN FORCES DECORATION
WO LG Peverill, Sgt RA Garnhum, Maj HJ Nadeau

Welcome • Bienvenue

A cordial welcome to the Canadian Forces Dental Services is extended to: Cpl RR Kossakowski, Cpl JOJP Laperle, Cpl JW Christensen, Cpl BH Davis, MCpl REF Christiansen, Pte TC Rocco, Pte JGN Moir, Pte JAR Neveau, Cpl WE Blackley, Cpl JGL Girard, Cpl LE Petley, Cpl JR Levesque, Sgt WL Garnett, MCpl RA Portuondo, MCpl WD Jackson.

Farewell • Au Revoir

The best of luck to: WO DB Wood, MWO HC Kirby, Sgt RW Roberts, Cpl MR Ellsworth, Cpl GL Brophy, Sgt DH Hardy, Sgt JN McKenzie, WO MA James, Sgt SJ Kirley Mrs J Verhoege.

Vital Statistics

MARRIAGES

There were no marriages reported this quarter. The Editor is apprehensive. Surely the supposed decline of this noble institution hasn't reached the ranks of the Dental Services?

However, BIRTHS don't seem to be similarly affected:

DAUGHTERS: Capt and Mrs DF Clark, Capt and Mrs J Delong, Cpl and Mr Boulanger.

SONS: Capt and Mrs HV Ferber, Capt and Mrs RY Gish, Maj and Mrs W Budzinski, Maj and Mrs VJ Lanctis.

CONDOLENCES

Deepest sympathy is extended to Sgt E Schultz and Sgt J Thorburn on the loss of their fathers; Cpl EW Creelman on the loss of her father; and Sgt CE Schmelzle on the loss of his father-in-law.

Colonel Gordon Benjamin Shillington, CD DDS BSc FICD
(Retired)

One of the best-liked and most able officers ever to wear the insignia of the Royal Canadian Dental Corps died on 14 February 1974.

Colonel "Gord" Shillington was born in Blenheim, Ontario in 1910, graduated from the University of Toronto in 1934 and joined the Canadian Dental Corps in November 1939. He served continuously from then until his retirement in 1963, at which time he held the position of Deputy Director General of Dental Services. After several years of civilian practice in Manotick, Ontario, he and his wife Edith took up residence in Freeport, Bahamas.

Many of his old "Corps" friends had the opportunity to reminisce with Gord during BGen GC Evans' retirement dinner last October. We knew he had not been well for some time but little thought we were seeing and speaking to our affable and respected confrère for the last time.

FRENCH SPEAKING MADE EASY. The above photo was submitted with only the caption and the site identified as the Paris Flea Market. Responsible reporting requires a fuller explanation, and inasmuch as our publishing deadline precluded an authenticated report on this bizaare bazaar service, the following detail has been extracted from a non-existent manuscript which forms part of the recommended reading of a local level 3 language course.

Such merchandising has its origin in a venture developed during the French Revolution by one Monsieur Goule de Goulu, a moonlighting "bourreau d'état". He undertook to alleviate a social inequality of the day by providing the edentulous peasantry with artificial "plates" - at no expense to himself, his suppliers being the beheaded and equally toothless aristocracy who reluctantly served as the clientele of his primary profession. From the beginning it was a self-service operation, the transaction conducted on an "as is-where is" basis, without guarantee of fit or available refund. Little has changed in the commercial aspects of this low cost denture service, and the merchants of today maintain close liaison with "les infirmiers de Paris" and its mortuaries.

There is absolutely no proof that the staff of the unidentified dental unit in Europe which provided the photo is in any way connected with this business.

The CANADIAN FORCES DENTAL SERVICES Quarterly

VOLUME FIFTEEN • NUMBER TWO • JULY 1974 •

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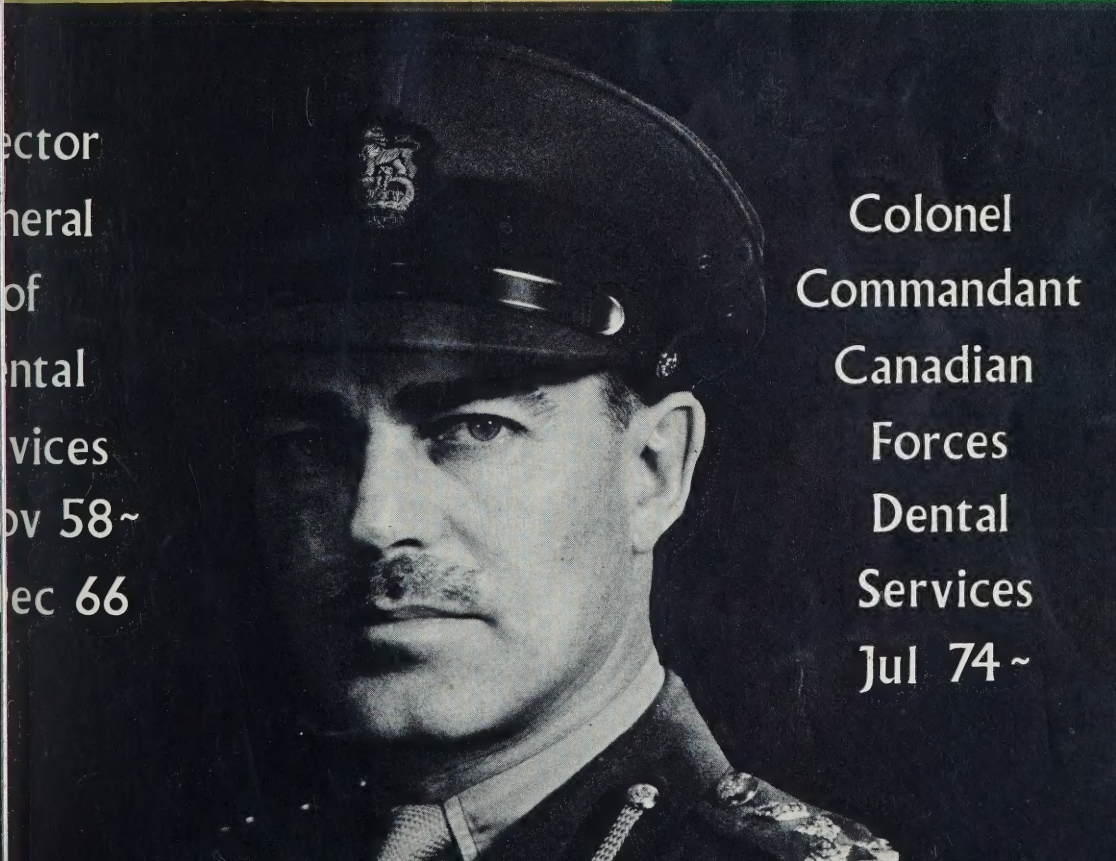

Colonel
Commandant
Canadian
Forces
Dental
Services
Jul 74~

The CFDS Quarterly

•VOLUME 15 • NUMBER 2 • JULY 1974•

Published by authority of Brigadier-General L.G. Craigie, CD, QHDS, DDS, FICD, in April, July, October and January, the Quarterly serves as a means for the exchange of ideas, experiences and information within the Canadian Forces Dental Services. Views and opinions expressed are those of the authors and not necessarily those of the Director General of Dental Services or the Department of National Defence.

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BGen Baird appointed Colonel Commandant *(page 1)*

Subscription: $6.00 per year. New subscriptions or renewals, accompanied by cheque or money order made to "The CFDS Quarterly" should be sent to:

The Director General of Dental Services,
National Defence Headquarters,
Ottawa, Ontario, Canada.
K1A OK2.

COLONEL COMMANDANT

By the appointment of Brigadier General Kenneth Martin Baird, OBE CD as Colonel Commandant of the Canadian Forces Dental Services, the Minister of National Defence has revitalized the military career of an officer who, through his policies, personal example and strong leadership has made significant and lasting contributions to the dental services of the Canadian Armed Forces.

General Baird, who retired as Director General of Dental Services in 1966, began his association with the military as a Signals Officer before World War 2. Having received his degree as Doctor of Dental Surgery from the University of Toronto in 1938, he enrolled in the Canadian Active Service Force (Canadian Dental Corps) in November of the following year and had wartime service in the United Kingdom and North West Europe – after which he joined the Regular Force. He held various senior appointments in the RCDC prior to becoming DGDS in November 1958 and on retirement accepted the position he still holds as Director of Clinics at the Faculty of Dentistry, University of Western Ontario.

Since retiring, General Baird has maintained a keen interest and involvement in the affairs and personnel of the CFDS and it is gratifying that his talents and counsel are available once again in an official capacity. As Colonel Commandant, an appointment which has been vacant since the death of Brigadier E.M. Wansbrough OBE MM ED CD in 1970, Brigadier General Baird will serve all facets of dentistry connected with the military, including the regular and reserve components and the RCDC Association. He will advise NDHQ on matters of significance to these organizations and maintain liaison among them. The appointment is for a term of three years and we wish Brigadier General Baird well during his tenure.

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TREATMENT REQUIREMENTS AMONG NDHQ PERSONNEL

Sergeant D. J. Hollins, CD

Statistics released by the Canadian Forces ental Services normally reflect the entire service ommitment or certain large sub-populations. The eed for specific information about the workload icing the National Defence Headquarters Clinic as recognized and, to that end, the findings sociated with the consecutive examination of 00 officers and 700 other-ranks were analysed.

The study covered the period from June 1972 January 1973, with a population-at-risk of approximately 3,200. Table 1 shows the coding at annual recall for the population.

TABLE 1
CODING AT ANNUAL RECALL EXAMINATION

Code	Officers (700)		Other Ranks (700)		All Ranks (1,400)	
	No.	%	No.	%	No.	%
Uncoded *	239	34.1	206	29.4	445	31.8
Yellow	7	1.0	20	3.0	27	1.9
Blue	68	9.7	97	13.6	165	11.8
Red	386	55.1	377	53.6	763	54.5
Total	700	99.9	700	99.6	1,400	100.0

* More than 15 months since last examination.

It was found that 274 officers and 268 other ranks – 39.1 and 38.3 percent respectively – required no dental treatment.

The requirements (excluding operativ treatment) for the remaining service personnel ar shown in Table 2.

TABLE 2
TREATMENT REQUIREMENTS (Less Operative)

Treatment	Officers	Other Ranks
Prophylaxis	301	259
X-Ray	109	69
Panorex	13	11
Max. Ant. teeth missing	5	18
Temporary Acrylic PUD worn	1	2
Immediate Treatment required	15	19
Denture Reline	12	11
Biopsy	2	1
For Periodontal Consult	17	13

A record was kept of those personnel who were Red (dentally fit) on recall. There were 386 such officers and 377 other ranks. Of these 112 and 109 respectively required maintenance care.

The operative requirements of the personn who were Red on recall were recorded by numb of surfaces needing restoration. These requiremen are shown in Table 3.

TABLE 3
RED MAINTENANCE CARE REQUIREMENTS BY NUMBERS OF SURFACES

	Total	1 Surface		2 Surfaces		3 or more Surfaces	
		No.	%	No.	%	No.	%
Officers	112	41	36.0%	47	42.0%	24	21.0%
Other Ranks	109	48	44.0%	36	33.0%	25	22.0%
Total	221	89	40.0%	83	37.5%	49	22.5%

In summary, fourteen hundred consecutive dental examinations were recorded over a six month period. Of this group 39 percent required no treatment. Red coded service members totalled 763 or 54.5% but 221 or 28.9% of them required maintenance care. The largest percentage of this group required only one surface restored. Throat and floor of the mouth inspections revealed three unsuspected lateral wall throat lesions. The maintenance care for the entire group of 1,400 servicemen averaged .99 surfaces per member.

Editor's Note.

The collection and recording of data f naturally to the clinical assistants. Recognition them of the potential value of available materi its collection and assembly into worthwhile repo is, however, infrequently encountered.

This article demonstrates admirably t significant detail inherent to clinical operation a we congratulate Sgt Hollins on the interes inquisitiveness and hard work she displayed writing it.

REPORT OF THE FINDINGS OF A DENTAL HYGIENE FEEDBACK QUESTIONNAIRE

Lieutenant-Colonel J.V.P. Chatwin,
CD DDS DDPH FICD

A two week senior officer symposium ealing with the management aspects of leadership as held in June 1973 at the Canadian Forces chool of Management in Montreal. The candidates ttending included 30 Colonels and Lieutenant olonels, Base/Station Commanders, Commanding fficers and Staff Officers, based from Winnipeg to alifax. This provided an opportunity to obtain a nior officer assessment of the Canadian Forces ental Service Preventive Dentistry Program.

The candidates were requested to complete a uestionnaire which was prepared by the author, nd by LCol M. Deyette and Maj H.S. Wood of the ental Division at NDHQ. Job identification, vareness of the CFDS Program as well as uestions designed to demonstrate their knowledge f oral hygiene procedures were included. They ere also asked for comments on possible nprovements to the service provided by the FDS. The questionnaire and comments are produced at the end of the article.

From the group of 30 there were two on-responses. Both of these officers had other mmitments at nearby Mobile Command eadquarters during portions of the course. The sponse population was considered to be 28 fficiers; 14 classified themselves as line officers – mmanding troops and 14 as staff officers. The sults are based on a 100% response.

Ninety-six percent of this group had heard of ie CFDS Preventive Dentistry Program. One fficer had never heard of it and more startling, iree had only heard of the program in 1972. wenty-five percent learned of the program irough a briefing by a Base Dental Officer and 7% during a routine dental visit to a clinic.

The majority of these officers (67%) knew ie two key features of the program; 85% of these oted "annual recall" as one key while rogrammed dental treatment" drew a 71% sponse.

Twenty-six officers had visited a dental clinic iring the past year. Eighty-nine percent of the sits were routine. Of the routine visits 60% were illed to the clinic with 48% notified by phone and 0% through the use of routine orders.

Fifty-three percent associated "dental aque" with a "bacterial film" while 39% thought of it as "food debris" or a "white coating on the teeth". However, notwithstanding their concept of plaque, 90% stated that plaque could best be removed by the use of floss.

The soft tooth brush appears to be the more popular with 53% reporting its use. The hard brush was used by 39%, while 8% feel it doesn't matter which type is used.

Sixty percent of the sample use floss infrequently or not at all. Twenty-one percent reported daily use and 19% said they used it twice a week. Since plaque becomes harmful after 48 hours then the "twice a week" group should be included with the "infrequent" group of non-users. Flossing is obviously not an established habit in this group.

As "leader-managers", 57% encourage their subordinates to participate in the Preventive Dentistry Program while 42% leave it up to the individual service person. Ninety-two percent felt the program was not impersonal and 89% felt that the Base staff (i.e., non-dental personnel) should actively assist in the program operation.

Regular progress reports were received by only 4 of the 14 line officers with 2 monthly, 1 quarterly and 1 yearly report being submitted.

Candidates were asked, "Is there anything the Dental facility might do to make the program more responsive to your needs? ". Favourable comments, "Keep up the good work! or "We're happy! ", were made, but eleven officers had specific comments. These are listed at Annex B.

Discussion

Two points are apparent. The Dental Service educational program appears to be working, since 96% of the sample had knowledge of a preventive program in the Canadian Armed Forces and 90% knew the tool used to remove plaque.

Comparing this to the preliminary findings of a survey made by the National Opinion Research Centre, University of Chicago, which showed that only 24% of a random national sample of adults had ever "heard or read about dental plaque", it is apparent that the educational aspect of the program is effective. However, teaching is not learning and our success in establishing flossing as a home care habit is no more impressive than Barkleys 1:7 figure.

Brushing as shown by this study is consistant with our life style. It has been established through education and with the passage of years as a routine procedure in home oral hygiene. It i interesting to speculate whether flossing will eve be consistant with a Service life style.

QUESTIONNAIRE
DENTAL HYGIENE FEEDBACK

1. I am a line/staff officer.
2. Have you heard of the "Canadian Forces Preventive Dentistry Program"? YES/NO
3. When, to the best of your memory, did you first hear about the program? (a) 1968 (b) 1969 (c 1970 (d) 1971 (e) 1972
4. Were you a line officer at that time? YES/NO
5. How did you hear about the program: (a) briefing from the base dental staff? (b) in the denta facility during a visit? (c) rumours?
6. Two (2) key features of the program are: (a) treatment for all servicemembers; (b) annua birth-month recall; (c) fluoridation of base water supplies; (d) programmed dental treatment; or (e) don' know.
7. Do you consider the program has value to the Commander? YES/NO
8. Have you visited your base dental facility during the past year? YES/NO
9. Was the visit "routine" or "emergency" in nature?
10. If it was a routine visit, were you called in? YES/NO
11. How were you notified? (a) wasn't notified (b) by phone (c) named in orders (d) memo
12. Is the program too impersonal? YES/NO
13. Is "dental plaque": (a) a bacterial film on teeth; (b) food debris around the teeth; or (c) a whit coating on the teeth and gums?
14. Plaque between the teeth can best be removed by the use of a: (a) water-pik; (b) hand operated toot brush; (c) floss; or (d) electric tooth brush?
15. Do you use a: (a) hard tooth brush; (b) soft tooth brush; or (c) doesn't matter?
16. Do you use dental floss? (circle one) (a) daily (b) twice a week (c) weekly (d) infrequently (e) not a all
17. As a leader-manager: (a) I encourage my subordinates to participate; (b) I tolerate their participatior or (c) I leave it to them.
18. Do you think the base staff should actively assist in the Base Preventive Dentistry Program? YES/N
19. Do you receive regular "program progress reports" from your Base Dental Officer? (a) YES/NO (b if YES, how often (1) monthly (2) quarterly (3) yearly
20. Is there anything the Dental facility might do to make the program more responsive to your needs?

DENTAL FEEDBACK QUESTIONNAIRE SPECIFIC COMMENTS FOR IMPROVED SERVICE

Eleven of the candidates responded to the question, "Is there anything the Dental facility might do to make the program more responsive to your needs? ", with specific comments. These have been extracted essentially verbatim.

COMMENT 1

Approximately 25 to 35% of my unit is away from the base for periods of three months or more; another 25 to 35% for periods of one to three months. These personnel miss their birth-month appointments and the system is loaded in such a way that most simply miss that year. The Dental Officer, despite having been explained the situation, persists on sending memos to me and to their COs giving low statistics of participation without explanations and obviously without results.

The same situation occurs when a membe misses an appointment because of unit tasking. have tried, unsuccessfully, to convince dental staf to allow my personnel to substitute a patient b another if the first is not available on short notic – this is refused because of the need to re-shuffl dental docs, etc – Results – the dental cha remains empty.

The birth month should be widened to birt month plus or minus two months. Due to m summer commitments, it is physically impossibl for my unit to go to the dentist except fc emergencies. In mid June – July – Aug a personnel are either living in the field, away fro base or on leave.

COMMENT 2

Help educate the family, especially th children. I believe I got the message through t them. Perhaps the odd evening session for famili with lectures, demonstrations and/or films woul be useful.

COMMENT 3

Suggest Senior Officers be handled as a group nd be given several time options from which to hoose.

COMMENT 4

Quarterly reminders and PR in routine orders ITREP on the success of the program.

COMMENT 5

A report, could be semi-annually, on the ental health of my personnel (who consist of 500 fficers and men).

COMMENT 6

Over my thirty years of military service I ave found the recommended procedures of ersonal dental hygiene promulgated by Dental fficers to have progressed from "You need to rush with a hard brush immediately after eating" o "You need to use dental floss once daily and rush with a soft brush once daily" it seems I have lmost destroyed my gums by use (too frequently) f a hard brush before being advised otherwise.

Suggest increased emphasis on NEED FOR EALTHY GUMS and procedures to ensure same.

OMMENT 7

Tell the CO when you are not getting o-operation from units or individuals.

COMMENT 8

It's OK now – thanks to MBO (Management by Objective) by the way.

COMMENT 9

Involve dependants, PTA, Etc. Tell unit CO if no support given. Suggest increase emphasis in "Need for healthy mouth".

COMMENT 10

My "temporary bite plate" of 1956 is still being used by myself. Although the plate was identified in the last brush-in (1972) as inadequate, the dental officer I approached to correct the situation indicated that you don't "build a birds nest in a rotten tree" and the work involved would not be worth his time or mine. I suppose I have to agree that the dental officers are over-worked and can not be expected to make up for years of neglect. I have now mentally turned off any further desire to have the situation corrected. A more positive approach to my problem would have made the program more responsive to my needs.

COMMENT 11

Why wasn't I told about dental floss when I was much younger? I have been conscientious re my teeth but before being exposed to this program thought that a **hard** toothbrush and dental floss once a week was the answer.

Lott

Covey

Dyer

MacDougall

Shillington

Wansbrough

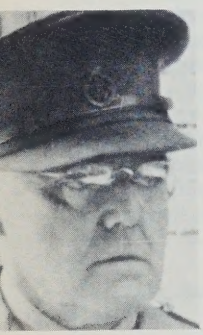
Once Upon A Time...

The 1947 RCDC Officers Seniority List, reproduced below, might well be considered an historic document. As the first of such lists published following World War 2, it contains the names of the fifty-five officers who, under the Director General Colonel E.M. Wansbrough and together with approximately 120 other ranks, formed the active component of the first peacetime dental establishment in Canadian military history.

Of this group nearly all served in the Corps until they were eligible for pension, and many of them made notable contributions to the present structure, policies and activity of the Canadian Forces Dental Services. Three of them succeeded E.M. Wansbrough as Director General of Dental Services and became Brigadier Generals, while eighteen attained the rank of Colonel and eighteen others were promoted to Lieutenant Colonel. As noted, many are now deceased and, with three exceptions, all have terminated their active military careers. The elder surviving members include W.O. Gardiner and W.E. Meldrum of Ottawa and R.C. Carroll of Peterborough. The "youngster" and senior serving member is Colonel G. MacDougall, Commanding Officer of 15 Dental Unit in Montreal.

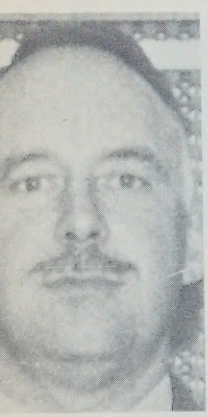
Probably five hundred names have appeared on similar lists during the intervening years, and hundreds more will appear in the future. Thirty years hence the CFDS will reflect the careers of such other officers, but the uniqueness of this original group and the NCOs who served them so well cannot be gainsaid, nor their everlasting contribution ignored.

Climo



Duff

Millar



Jackson

Cornish

MacLean

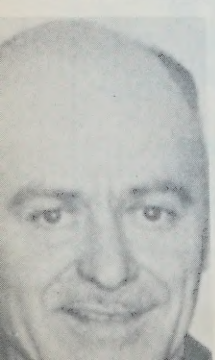
Turner

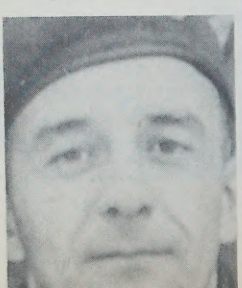
6

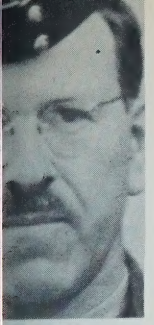
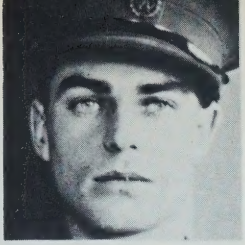
Butler

Oldfield

Harris





Gray

Baird

Drewry

Meldrum

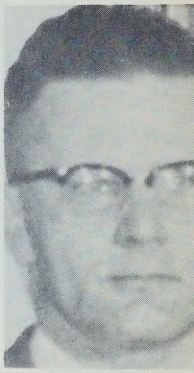
Lasalle

THE ROYAL CANADIAN DENTAL CORPS

Within a wreath of Maple Leaves the letters "C.A.D.C." in monogram form, the whole surmounted by a Crown. (Organized 13 May 1915)

Honourary Colonel: Brigadier F.M. Lott, CBE ED (ss Eng)
Honourary Lieutenant-Colonel: S.A. Moore,* Esq.

Brown



RHG Cunningham

		Date of Birth	Date of Rank
Lieutenant-Colonels			
ZF1985	C.B.H. Climo,* DCM ED	Apr 97	15 Aug 41
ZB967	R.E. Carroll, ED	Jan 98	1 May 42
ZC945	F.R. Drewry,* ED (msc)	Jul 96	14 Jul 42
ZC966	W.E. Meldrum, OBE	Aug 97	31 Mar 43
ZC193	K.M. Baird, OBE	Dec 11	29 Apr 44
ZB2549	G.B. Shillington*	Dec 10	17 Oct 44
ZC866	F.J. MacLean*	Jan 99	16 Dec 45
Majors			
ZF910	H.L. Harris*	Jun 08	1 Jan 42
ZB979	J.A. MacGowan	Jun 03	14 May 42
ZD992	P.R. Lasalle*	Aug 00	25 Jun 42
ZD2341	W.I. Whitehead*	Jul 04	3 Oct 42
ZH2883	G.E. Shragge	Mar 01	1 Apr 43
ZF224	I.A.L. Millar	Mar 13	1 Apr 43
ZB1025	V.R. Farrell	Feb 98	1 May 43
ZF916	S.K. Oldfield, ED	Jul 06	1 Nov 43
ZH963	W.R. Cunningham	Jan 11	18 Feb 44
ZF907	O.W. Crummey	Aug 12	13 Jul 44
ZB2980	J.W. Gabriel	Aug 99	13 Jul 44
ZB2517	A. Gardiner	May 10	13 Jul 44
ZG2923	L.M. Gray*	Jun 97	31 Jul 44
ZB913	B.P. Kearney, MBE	Feb 15	2 Aug 44
ZB2954	A.C. Leman	Aug 12	2 Aug 44
ZB2785	T.L. March (acting)	Jan 08	4 Aug 44

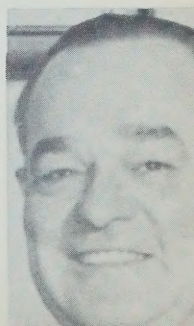
Brusso

MacGowan

Leman

Sinclair

Whitehead



Marsh

Barber

WO Gardiner

Kearney

A Gardiner

Marchant

WR Cunningham

McNally

Carroll

Shragge

McCrary

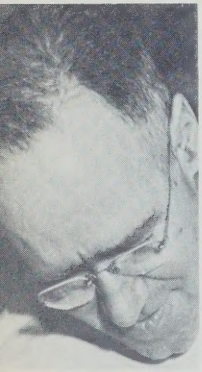
ZA1896	C.W. McCrary	Aug 03	6 Oct 44
ZC2921	W.O. Gardiner	Jul 97	6 Oct 44
ZC2922	J.C. Duff*	Apr 94	14 Dec 44
ZF918	W.M. Sinclair	Sep 06	22 Mar 45
ZH1940	R.S. Kinney*	Feb 05	25 Oct 45
ZB988	G.R. Covey (acting)	Mar 19	19 Dec 45
ZB2788	E.C. Purdy	Oct 10	25 Jan 46
ZD1984	G.A. Barber (acting)	Jan 01	28 Feb 46
ZC989	J.K. McNally* (acting)	May 06	1 Oct 46

Bagnall

Anglin

Captains

ZK1935	J.G. Hamilton	Oct 09	28 Feb 40
ZM2989	F.M. Murray	Oct 01	1 Feb 41
ZB1939	C.L. Johnston*	Jul 06	14 Jun 41
ZK911	H.W. Hart	May 09	25 Nov 41
ZB2513	R.H.G. Cunningham	Jan 18	1 Jan 42
ZB2444	R.E. Brown	Sep 14	24 Aug 42
ZE2471	B.J.H. Marchant*	Dec 10	28 Feb 43
ZB928	C.W. Cornish	Jan 17	31 Mar 43
ZB1937	R.B. Jackson	Apr 19	10 Mar 44
ZB2860	C.W. Crutchfield	Jun 16	19 Nov 44
ZB2338	N.A. Butcher	Jul 21	21 Dec 44
ZB1933	J. Durand	Sep 18	22 Apr 45
ZM1931	A.W. Brusso	Nov 16	16 Jul 45
ZB2279	J.G. Butler	Sep 21	28 Jul 45
ZD2801	W.W. Anglin	Jun 21	29 Jul 45
ZM2975	G.C. Evans	Jan 19	30 Dec 45
ZB908	R.E. Dyer	Sep 21	8 May 46
ZB947	T.M. Walker*	Feb 23	8 May 46
ZB2316	D.H. Hillier	Mar 21	8 May 46
ZB2450	J.W. Turner	Feb 22	8 May 46
ZD2854	E.P. Dentremont	Dec 19	18 May 46
ZF904	S.G. Bagnall	Aug 22	24 Jul 46
ZD1987	E.J. Hyde	Dec 21	2 Aug 46
ZD2878	G. MacDougall	Aug 22	2 Aug 46



Kinney

Hillier

(*known deceased, as of 1 July 1974)

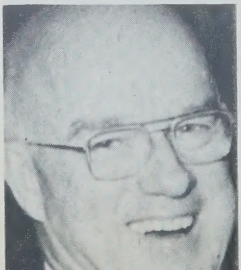
Hamilton

Crummey

Butcher

Purdy

Evans



Royal Canadian Dental Corps Association

eunion

The RCDC Association is planning a Dental Corps Reunion in conjunction with the CDA Convention this fall. You on't have to be a member of the Association or of the CFDS to be made welcome. Here are the details as worked out by harlie Hunt.

So that you can renew old acquaintances and talk over old times, when at the Canadian Dental ssociation Convention in October, be sure to attend the **Dental Corps Reunion in the Civic Ballroom, heraton Four Seasons Hotel Toronto, from 4 to 6 p.m. Monday, 7 October 1974.**

Let's make this a greater success than the 1967 gathering. Bring your kitbag full of army stories and in in the fun.

Be sure to pass the word around.

Chas. Hunt (Major)

lembership

The following letter was recently prepared by the RCDC Association and sent to those potential members whose names ere in their files. Cognizant of the importance of this Association to both that component of dentistry associated with the ilitary and to the profession at large, the Quarterly is pleased to reproduce this invitation for those of you who are not on e RCDCA's mailing list.

The purpose of this letter is to invite you, if you are not already active, to become a member of the oyal Canadian Dental Corps Association.

The objects of the Association, as set out in the constitution, are: "To promote the efficiency and sprit-de-corps of the Canadian Forces Dental Services, to co-operate with fellow members of the onference of Defence Associations in the promotion of general efficiency of Canadian Defence Forces."

Currently, the R.C.D.C.A. is concerned with the new concept of the Canadian Reserve Forces. At resent, the Dental Corps Reserve is seriously depleted. However, a revitalization of all Reserve Forces is nminent, and this is particularly important for the Dental Reserve.

The Annual Meeting of the R.C.D.C.A. is attended by delegates from all Areas across Canada. In turn, ur delegates attend the Annual Meeting of the parent body, which is the Conference of Defence ssociations. At this meeting, resolutions prepared by the various Corps Associations are presented and iscussed in depth. Final recommendations are then presented to the appropriate authorities.

I should like to point out that the R.C.D.C.A. supports Service Dentistry in every way possible and in eturn has the complete support of the Director General Dental Services.

To make our voice heard, we need a strong membership. The annual membership dues have been ixed at five dollars. Although we receive an annual grant from the Department of National Defence, this is nadequate to meet the recurring expenses of the Association.

All officers of the Canadian Forces Dental Services (Militia), officers of the Supplementary Reserve, anadian Forces Dental Services officers honorably retired and officers (graduates of dentistry), serving in, r having retired from the Canadian Armed Services, are eligible to become active members.

Life Membership may be conferred upon members, other than those serving in the Canadian Forces ental Services (Militia), upon payment of the sum of twenty-five dollars. Life Members are elected at the nnual Meeting of the Association, and such members shall be exempted from payment of annual dues.

As President of the Royal Canadian Dental Corps Association, I urge you to become an active nember and to let us know how you feel about the problems of the Canadian Forces Dental Services.

Sincerely,

M.C. Parks (LCol.)
President, R.C.D.C.A.

To: Capt. J. Thomas,
Secretary,
R.C.D.C.A.
2039 Dovercourt Ave.
Ottawa, Ont.
K2A OX2

(Please reproduce locally)

I wish to become an active member of the R.C.D.C. Association, and enclose my cheque for five dollars.
NAME: (Please print)_____
RANK: _____
ADDRESS:_____

CANADIAN FORCES DENTAL SERVICES NEWS

TOOT! TOOT!

In an atmosphere of urgent purpose similar to that which once pervaded the former Union Station in Ottawa (now the Government Conference Centre), twenty-eight officers recently gathered there for the annual DGDS and Unit Commanders' Conference.

The trains of thought were powered by coals of logic albeit supplemented by the oil of compromise and occasional bursts of natural gas. The hustle, the the noise and even the distracting soot of the past were recalled as, following the roundhouse assembly, the delegates were shunted into syndicate sections, handed their orders and dispatched over separate tracks towards the common terminus of well-considered answers to equally well-considered questions - all this accomplished with a certain amount of huffing and puffing.

In his opening remarks to the conference, BGen LG Craigie stated that during his tenure as DGDS matters of general policy and activity affecting the CFDS would arise from the collective deliberations and decisions of the Unit Command

(Left to right) Front row: Col G MacDougall, Col LR Pierce, Col WR Thompson, BGen LG Craigie, Col JC Brick, Col DH Protheroe, Col LA Richardson. *Second row:* Capt EM Lobb, LCol LA Reynolds, Capt DE Fraser, Maj V Lanctis, LCol HW Brogan, LCol JVP Chatwin, LCol JM Donely, LCol AG Taylor, LCol DH Hillier, LCol JW Fletcher, LCol MN Deyette, Capt JW Shore, Maj RG Peebles. *Third row:* Maj HS Wood, Maj MB Fisk, Capt WA Jackson, Capt JR Savoie, Capt FJ Reid, Lt JJL Lamontagne, Lt M Gelinas. *Missing:* Lt PD Peterson.

rs. To this end the syndicate approach as adopted and each of three groups was ssigned specific problems. Their findngs were later presented in open session here, after further discussion, decisions ere arrived at.

Many items of importance to our role nd future activity were dealt with in his manner, and in summing up the fouray meeting, BGen Craigie expressed his omplete satisfaction with the new formt, the obvious interest and preparation n the part of all delegates, their houghtful consideration of the matters put before them and the recommendations made. He requested forbearance concerning any delay experienced in implementing the measures adopted, pointing out that some of these involve procedures and expenditures beyond his control.

Everyone who was there can attest that this year's conference was one of hard work and meaningful accomplishment,which reflects the monumental preparation and efficient control exercised during the proceedings by the Chairman, LCol MN Deyette.

REVENTIVE DENTISTRY SYMPOSIUM

14 Dental Unit hosted dental officers rom throughout the CFDS when the 1974 reventive Dentistry Symposium was held n Winnipeg 19-21 March.

Although the weatherman did not coperate and the accommodation was not f the highest standard, no one allowed flagging spirits to dampen their enthusiasm or interest and many constructive recommendations were made.

The general concensus of opinion was that we are well on our way to our established goals and require only a few minor changes to keep the program going at full tilt.

(Left to right) Front row: Maj C Brown, Maj HS Wood, LCol JF Begin, LCol JJN Wright (Chairman), Col LR Pierce (CO 14 DU), Maj IW Susser (Coordinator), LCol PR MacQueen, Maj RH Headley, Maj BA Gaudet, Maj GR Nye. *Second row:* Capt TA Bradley, Capt LR Holland, Maj DA Graham, Capt FR Margetts, Capt MS Bouris, Maj DG Jones, Maj R Paturel, Maj G Gunther, Maj J McDonald. *Third row:* Capt JD Rowat, Maj HJ Nadeau, Capt AP Charlebois, Maj JL McNeill, Capt PR Darlington, Capt PD Higgins, Capt PR Wooding, Capt EF Sasse, Maj JW Jolly, Maj EFA Foley. *Missing:* Col JC Brick, Capt RA Hunt.

CF Dental Services School

by Chief Warrant Officer WD Morris, CD

ISITS

On 11 April 35 third-year dental students from the University of Western Ontario visited the school. The trip was arranged at the request of Dr B Martinello, from Community Dentistry Services

at Western to enable he and his students to relate the military and civilian approaches to dental services and to view the dental training facilities at Borden.

The day began with a welcome from the Commandant, Col LA Richardson, who extended the invitation to closely inspect our facilities and resources. The students were briefed on the CF Training System, including the dental trades profiles, and were also shown a 35mm slide series depicting the requisites and career opportunities for DOTP candidates. The morning program was concluded with a guided tour of the school and included opportunities to observe PL3 dental clinical assistants and PL4 laboratory technicians under classroom conditions.

In the afternoon three sites were visited. The dental van and field equipment had been set up in an operational mode and every moving part was explained during MCpl Violette's presentation to one-third of the students.

Concurrently a second group observed CWO J Sadler placing and carving amalgam restorations, thus demonstrating the role and training of PL8 dental therapists.

The third unit was conducted by CWO Morris who demonstrated handpiece repair and maintenance techniques, and described the duties and capabilities of dental equipment maintenance personnel.

Each group visited each site in turn; then their questions were answered over cups of coffee.

The day's program was completed by a lecture and movie presentation of the CF Preventive Dentistry Program.

In addition to the class from Western University, other visits to CFDSS during the last quarter were: 23 April - executive of the Govt of the Province of Quebec; 13 and 17 May - Canada Manpower/ School Guidance Counsellors; 17 May - Dr Cleary and Dr Huff from Ontario Hospital Orillia; 11-12 June - Mr Peter Thomas, Research Engineer for Ticonium, to help solve problems related to maintenance of equipment; 3 June - LCol Leblanc from TCHQ; 6 June - BGen Johnson from TCHQ.

CFDSS personnel away on trips during this period were: 18-20 April - LCol Reynolds to the Perio Therapy Seminar Boston; 25-27 April - MWO Parker to a Stores Conference at 1 DED; 30 April-2 May - Col Richardson and LCol Reynolds to DCIEM for a conference; 30 April-3 May - Capt Salois to Quebec Dental Conference in Montreal; 2-3 May - Col Richardson to a convention of the Quebec Dental Assn, Montreal, where he accepted, on behalf of CFDSS, a presentation in appreciation of the hospitality extended to the executive of the Assn during their visit to CFB Borden last February; 12-15 May - Col Richardson to U Army Health Sciences Academy, Fort Sam Houston; 13-15 May - Maj Morley and Ma MF Pilon to ODA Conference in Toronto; 28-31 May - Col Richardson, LCol Reynol and Capt Reid to Unit Commanders Confer ence, Ottawa; 30 May-3 June - Capt RS Haines to Alberta Dental Association co vention at Calgary; 7-11 June - Maj Pi on, CWO MacDonald and Sgt Albertson to a dental assistants training seminar in Ann Arbor, Mich; 12-13 June - Col Richardson to a training conference at TCHQ 6 June - Maj Fearon and Capt Haines to a Forensic Dentistry conference at HMCS York, Toronto.

SOCIAL SCENE

The annual CFDSS spring dance on 17 M provided opportunities to welcome new members to the staff and say farewell t those soon to be leaving us. New arriv als: Cpl JR Levesque and Mrs C Owen,ou new librarian/training aids controller. And leaving: LCol Reynolds to 35 FDU i July; Maj Morley in August for a 2-year course at the University of Toronto; Capt DM Hodges to civilian life in Prin George BC; CWO KE Laurence to 12 DU, Ha ifax in July; CWO Morris, retiring in September; WO JG MacDonald to 12 DU, Gagetown, in June; Sgt Delmage to 14 DU Portage la Prairie in June; Cpl Paradis to school for training as a civilian dental hygienist, in July.

SPORTS

Maj Fearon earned a gold medal with t best recorded time of 8:57 for the unde 30 age group in the annual Gil Hyde Rel ay road race ... The CFDSS 11-man road runner team placed third in competition with eight other teams from CFB Borden. On the team were Maj Fearon, LCol MacQueen, Maj Pilon, Capt Hodges, Capt Wil liams, Capt Reid, WO MacDonald, WO Deloughery, WO Fathers, Sgt Garnett, and Pte Meredith ... Twenty of our keen gol ers competed in the CFDSS Golf Tourname 22 May. There was stiff (?) competitio among Capt Salois, Capt Hodges, MWO Tod and WO Davies. The tournament was re- played during the wind-up steak barbequ

1 Dental Unit

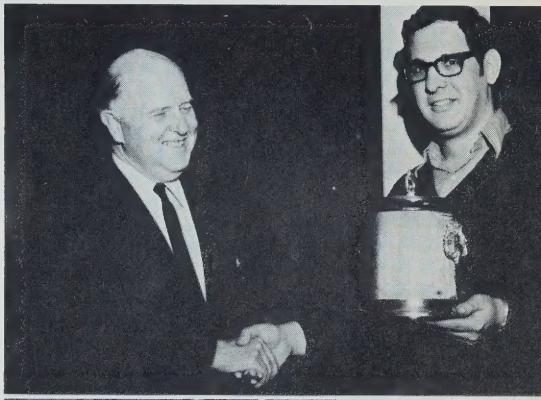
by Sergeant MY Fletcher, CD

INS and OUTS

Cpl Dick Kossakowski is back from Borden and busy demonstrating his knowledge after successfully completing his PL3 course in May ... Ms Mary Ellen Jensen received her CFDSS diploma in June certifying her as a qualified dental hygienist. Following the course she spent two days writing the provincial hygienist exams at Western University. Mary Ellen did well on both counts ... *Lab liberated:* MWO McFadden is shaking his head as he prepares for the arrival of Cpl S Searle, the first female lab tech to graduate from CFDSS ... Two of our members have recently retired: Capt Myron Cherun and Cpl Bernie Clarke. Myron has been with us for the last five years and is now practising in beautiful downtown Ottawa. Bernie was loaned to the dental clinic from the RCHA to help out during a personnel shortage and ended up staying with us for three years. Although not officially a member of the CFDS, Bernie's dedication to the dental services was evident to all. He and his wife Wanda are now residing in Manitoba ... Maj Gen Gunther, his wife Cathy and their four children will be residing at Fort Dix NJ for the next two years where Gen is attending the General Dentistry Course ... On 26 June the senior NCOs of 1 Dental Unit held a luncheon in honour of LCol JVP Chatwin who is retiring this summer after 23 years service ... WO June Patterson delivered a healthy baby girl, Heather Lynn, on 24 April, three weeks ahead of schedule.

GETTING AWAY FROM IT ALL

Capt Bob Bowes and wife Dibby took a three week trip through western Canada and down to Seattle. This expedition led to great expectations. They are announcing the impending arrival of their first



(Top) Capt Myron Cherun receiving a farewell gift from LCol Chatwin on behalf of 1 Dental Unit personnel.

(Middle) Cpl Bernie Clarke receiving a farewell gift from LCol Chatwin and his Certificate of Service from BGen Craigie.

(Bottom) LCol Chatwin congratulates Rene Tremblay on his promotion to WO with MWO Earl Mc len looking on.

child in September ... Capt Al Charlebois and wife Terry were recently "honeymooning" in the Niagara Falls area ... Capt Michael Chagnon was off to N.B. to fish for salmon. On return he reported that the fish didn't like what he was offering. An honest fisherman! ... Sgt Ethel Snippa soaked up three weeks of B.C. sunshine recently ... Mrs Gert Mantle and her husband Fred were off to Kingston and Wasaga Beach ... With his assistant on holidays, Maj Andre Marcil took a "break from it all" but stuck close to home this time ... July finds Capt Dave Rowat and Sgt Donna Hollins holding the fort at CFB South as Cpl Manon Brosha heads east on posting, Sgt Muriel Fletcher and husband John are east on vacation and Maj Yvon Cyrenne, our ski enthusiast, sits at home wondering if his impending course at the Staff College is really worth having to take all his leave in the summer!

CURLING WINDUP

Ottawa area personnel gathered for the final bonspiel of the season under sunny skies and 75 degree temperatures. The windup was held at CFB Ottawa North and the Ash Temple trophy went to LCol Morley Deyette, Capt Dave Rowat and MCpl Lyall Kallman, who, in spite of being one man short, came up with the winning team.

GOLF GETS UNDERWAY

The first unit golf tournament of the year was held at CFB Ottawa South on 20 June. There was a good turn-out despite the weatherman's prediction of rain. It rained. "Old soldiers never quit," BGen Craigie was heard to say as he proceeded to finish his 18 holes - the last 8 of them in the worst thunderstorm and torrential downpour of the season. This shining(?) example left Maj Andre Marcil Capt Gaten Boulanger and MWO Roy Jones (the other members of the foursome) no choice but to finish. By the time they squelched back the rest of the "young soldiers" were quite dry - from the rain, at least. Prizes went to Maj Marcil (low net) and Gaten Boulanger (second low net).

Bob Wormington presents the Ash Temple trophy to MCpl Lyall Kallman, Capt Dave Rowat and LCol Morley Deyette.

11 Dental Unit

by Sergeant RW Boyd, CD

MILITARY AID TO THE CIVIL ARTS

It's not unusual for the CoVal Choristers of Courtney to turn to CFB Comox for help in staging their annual Broadway musical, and this year was no exception when casting the male lead of the rollicking hillbilly hit "Li'l Abner"had them completely stumped. They needed someone with acting ability; handsome, brave, strong, honest, gentle, not int-

erested in women, and of mediocre intelligence. Finding no local candidates they ran these specifications through a computer. The machine hiccuped, shot sparks in the air, belched smoke and finally spat out a card. On it were two words: MILITARY DENTIST. The choristers raced to the base, burst into the dental clinic and gasped: "Is there anyone here who wants to be in a play?" Capt Brian Schow took his knee off the patient's chest and drawled, "Sho do!"

From then on, Brian was engaged in the serious work of learning to sing well enough to carry this lead role. It required several weeks of voice lessons to improve his pitch and range and to conquer all the tricks of projecting his voice to an audience. Much time and effort was also spent at the theatre learning the techniques of acting, all the stage "business" and of course,learning a lot more lines than "open wider". Brian's home life was even more affected by the fact that his wife was also in the show. She played the part of Appassionata Von Climax who, at one point in the musical, tries to trap the hero into marrying her.

"Li'l Abner" ran for six nights in the Courtney Civic Theatre, every performance playing to a full house of enthusiastic and appreciative patrons. The production was also presented for one night in the McPherson Playhouse in Victoria.

RETIREMENTS

A delightful evening in Victoria's Chinese Village honoured MWO Stan Robertson on his retirement after 30 years of service. In attendance were the dental staff and wives of the Esquimalt area and many friends. Stan and his wife Francis plan to stay in Victoria for a while, but such places as 100 Mile House and Edmonton are retirement possibilities.

SPORTS

Our athletes have been particularly busy winning themselves all sorts of medals and other honours. Capt Milne qualified for a gold medal, having clocked in with 300 miles during CFS Masset's 100 day jogging competition ... In the aquatic field, Capt Jackson and Sgt Gratton both earned medals in CFB Esquimalt's 100 day swimathon, completing 2,100 lengths of the pool, which adds up to 30 miles ... Capt Jackson passed the CFB Esquimalt Sailing Club navigation and ship handling exam to obtain his "Skipper's Ticket". He has been assigned the Club's 28-foot sloop "Blue Goose", formerly sailed by ex-RCDC member, Maj Eden.

To round out our seamanlike posture, Capt Graham from Holberg has a crew berth aboard Dr Eden's Swiftsure entry and Capt Milne of CFS Masset passed a small boat handler's course, qualifying

him to handle DND whaler craft.

In sports more familiar to the land element, Maj Graham won the Men's League Club Curling Championship at CFB Chilliwack while Cpl Duncan was a member of the CFB Esquimalt volleyball team, capturing first place for the servicewomen's zone 1 championship held in Chilliwack 2-4 May ... The CF Hospital Esquimalt fastball team is strongly supported this season by Capt Margetts, Sgt Armstrong and Sgt Murley. Sgt Murley is starting his 23rd consecutive year of fastball in the Forces.

SECOND ANNUAL GOLF TOURNAMENT

The opportunity arose to combine business with pleasure, so while the "troops" were in CFB Esquimalt to attend the CO's conference, an additional day was planned for the golf tournament.

Lots of prizes, a cooperative weatherman, good participation, fine food and excellent organization by Capt Kendell and Sgt Hughes all combined to produce an excellent time. To make the event even more delightful, many of the wives from the Victoria area joined in the smorgasbord which followed the tournament.

Sgt Anderson was the winner of the low gross trophy donated by Ash Temple. Our thanks are extended to Mr Rees, their manager in Victoria, for his kindness on the company's behalf.

(Top) Sgt Anderson receives the Ash Temple low gross trophy from LCol Taylor.

(Middle) Maj Graham presents CFB Chilliwack's Duffers Award to Capt Hansen for shortest drive off first tee - three feet.

(Bottom) CO presents Capt Howie (Naden clinic) with the north end of a southbound horse, awarded for Worst Team Effort.

12 Dental Unit

by Captain DE Fraser

THIS'N'THAT

An invitation was received for CFDS therapists to become members of the Nova Scotia Dental Hygienists Assn ... Capt Lavallee, MWO Therien and Pte Poulin of the Gagetown detachment spent 13-24 May with two dental vans to provide dental services for 2R22eR ... 2Lt(W) Leek took part in this exercise and had the opportunity to fire personnel weapons and grenades under the direction of the "Van Doos" ... Friends of Sgt Wilf Wylie will be pleased to know that he has once again obtained a posting to Lahr. He and his family proceed to Mrs Wylie's homeland in July ... Cpl Deon Allen was presented with a "Run for Your Life" award for completing 100 miles by BGen Radley-Walters at Gagetown 27 May ... At CFB Gagetown, 2Lt Leek, WO Christiansen, WO Ath-

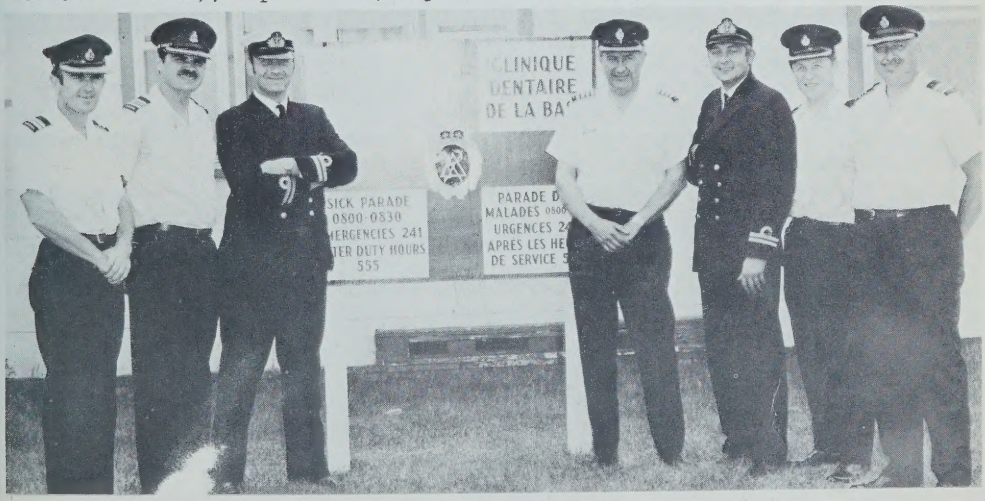
erton, Sgt Allen and Sgt MacLean participated in a Repelling Course at the Combat Arms School 29-30 May ... LCol MacDonald, BDentO Cornwallis, has become an expert in the construction of Grandmother clocks. He purchased a kit, thinking it would be numbered with easy-to-follow directions. He soon realized however that the building of his clock required skill and endurance. The clock has now been assembled and awaits insertion of the mechanical components. It is a beautiful creation in mahogany and LCol MacDonald can be proud of his achievement.

THIRST QUENCHER

The Stadacona dental detachment recently held a practice run prior to taking the semi-annual physical fitness test and enjoyed a beer break afterwards. In his perspiring haste, LCol Houde grasped a cool one and downed it. After the contents of the bottle had disappeared, the skeleton of a mouse remained fastened to the bottom of the bottle. LCol Houde overcame his concern by downing a second bottle and proceeded to the local brewery with the first bottle. There he was informed that such problems were usually solved on a one-for-one exchange basis but that since he was such a nice fellow they would give him a six-pack. Perturbed, LCol Houde saw the manager who took a different view of the situation. As a result, local dental personnel and their wives were treated to a guided tour of the brewery. They all agreed that the bright lights, checking and sterilization precluded foreign objects remaining in beer bottles. Incidentally, LCol Houde was unable to take the tour owing to a bout of 'flu ... or was it rodent-relapse??

Pte KL Thomas is congratulated by Mrs Connors, wife of the Base Commander, on being crowned Miss Cornwallis 1974. Pte Thomas, with the dental clinic since completion of basic training, represented the base in the annual Annapolis Valley Apple Blossom Festival.

Two officers from HMS Hermes - a Royal Navy aircraft carrier - visited CFB Greenwood in June. (LtoR) Capt Dalzell, Maj Flinn (Base Surgeon), Surg Lt Griffiths (Hermes Dental Officer), Col Protheroe, Surg Lt Charleston (Hermes Medical Officer), Capt Fraser, Maj Kelland (BDentO).



Left: WO Ian MacLean receives his CD from Maj Kelland, the BDentO at CFB Greenwood. Right: Col Protheroe presents Capt Fraser with a CFDS Crest. Capt Fraser is leaving the CFDS on posting to CFS Sydney as the PAdO.

DECISIONS, DECISIONS!

Maj Gray and WO Peverill boarded a service aircraft on completion of a TD trip to Bermuda and were taxied across the airfield to pick up other passengers. When the plane stopped at the Kinley terminal, the aircrew deplaned for a break. An aircraft attendant then appeared and asked Maj Gray if fuel was required for the trip to Trenton. Maj Gray, being unfamiliar with fuel requiremeents, said he didn't know if fuel was needed nor did he know how to find out. The attendant insisted that he and Maj Gray check the dials. "Oh sure, you need fuel," stated the attendant. "Will I fill her up?" Maj Gray put the decision-making process into effect and after reasonable evaluation, decided that indeed they needed fuel. When the aircrew returned they were a little less than overjoyed about the full tanks, but Maj Gray and WO Peverill felt much better knowing they had lots of gas for the flight to Trenton.

OUTGOING

On 13 June unit members gathered at the social centre at Windsor Park to say farewell to two long-term members of the CFDS. MWO Harold Kirby and Sgt Harold Roberts are retiring after 25 and 20 years service respectively. Col Protherc spoke of the "gentlemanly" qualities of MWO Kirby, and how his quiet effective leadership in the dental lab will be missed. Harold and his wife Irene will settle in the Annapolis Valley where the have recently bought a house.

Sgt Harold Roberts and his wife Elaine will stay in Halifax. Harold will be missed for his work ability and his "loc al contacts". He has been very active in organizing local functions.

13 Dental Unit

by Lieutenant JW Shore, CD

CO GOES

On 20 June unit members held a Bar-B-Q and Dance at the CFB Trenton Yacht Club to bid farewell to Col WR Thompson.

Col Thompson was presented with a gift

Maj Walker receives a silver tray fro Col Thompson on behalf of the personnel of 13 Dental Unit.

suitable for his specialty of oral surgery - an electric saw. Mrs Thompson was presented with a bouquet of flowers.

BDENTO GOES

The above evening was also the occasion to bid farewell to Maj JJ Walker, Toronto. Maj Walker started terminal leave 2 July after a 24-year career. He served in the Canadian Army 1944-46 in the UK and NW Europe and completed tours in Winnipeg, Edmonton, Gimli, MacDonald, Churchill, Cold Lake, Calgary, Clinton and Toronto.

HOT SEAT

The sporting event of the season took place at the CFB Trenton Golf Club on 12 June. This event, the semi-annual "Officers versus Other Ranks" golf tournament included personnel from HQ and 13 Dental Unit detachment Trenton. The officers repeated their performance of the last match and thoroughly trounced the Other Ranks, winning by an enormous 0.6 percentage point. Thanks are extended to the 2Lt who barely missed reaching a score of 200. Rumour has it that if MWO Mickey Kidd had completed the back nine the ORs would have won with ease. It is also reported that one young dental officer played the last few holes using a range ball due to a shortage of funds. One suspects that he visited the 19th hole early and spent all his cash.

(Top right) Sgt NL Highfield presents the Officers vs Other Ranks trophy to (LtoR) Col Thompson, Capt Jury, Capt Hamilton, Capt Crosthwait, Maj Jones. (Missing:2Lts KV MacDonald and BR Taylor)

(Bottom left) Col J KNowlton, BComd CFB Kingston, presents Sgt RW Danyluck with the "Most Sportsmanlike Player" trophy for his activities in the CFB Kingston intersection hockey during the 1973/74 season. Sgt Danyluck is the first recipient of this award.

(Bottom right) The winners of "A" Event, CFB Kingston Intersection Bonspiel '74. (LtoR) WO JA Fret, Cpl LD Payette, Sgt NJ Hope, Sgt RW Danyluck.

TEMPORARY DUTY IN LONDON

by Sergeant RW Danyluck

On 18 May Maj Nyc and I left Trenton for London to pr de dental treatment for personnel stationed in England. This was the first temporary duty trip I have undertaken and I cannot, for the life of me, see why people complain when they are despatched on such duty. London may not be as exotic as Moosonee or Lowther

but it proved to be a reasonably good alternative.

After a short layover in Lahr we flew to Gatwick Airport, about 35 miles from London and arrived at our hotel, about three blocks from Trafalgar Square, at 1700 hours 19 May.

Maj Nye visited friends the first weekend and I played the tourist role by walking from the hotel to Trafalgar Square, through Picadilly Circus and Soho to Leicester Square. There the honesty of London cabbies was demonstrated to me. After all the walking I had done, I decided to take a cab back to the hotel. When I told the cabby where I wanted to go, he said he wouldn't take me as the hotel was just around the corner. I could easily have been taken for the pro verbial ride.

Our first day of work was spent in set ting up the clinic, checking inventory and arranging appointments. The cooperation we received was excellent. Work progressed well and we accomplished our primary mission. Maj Nye, no stranger t

England, ventured outside the city to different locations while I spent most of my time in London. One of Maj Nye's trips took him to Blenheim Castle, Churchill's birthplace, his residence at Chartwell and also his grave at Bladon. This was a timely visit as many of the exhibits for Churchill's centenniary are now completed.

I visited the Greenwich Time Observatory and the Royal Naval Academy at Greenwich. I went aboard the "Cutty Sark", one of the fastest sailing ships of her time. I visited Madame Toussaud's Wax Museum and was impressed. The lifelike qualities of the figures are almost unreal and you have to be careful who you talk to or you may end up having a conversation with a ball of wax.

One of the better investments you can make in London is an inexpensive tour past all the famous landmarks on a double-decker bus.

All too soon our time was up and on 3 June we left Gatwick for Trenton and home, bringing with us fond memories of places we had seen and new friends we had made.

(Top left) Trafalgar Square pigeons.
(Top right) Wolfe slept here.
(Bottom right) Farewells at 1 Grosvenor Square - location of the dental clinic.

14 Dental Unit

by Sergeant A Gray, CD

POSTED OUT

Members of 14 Dental Unit used the spring social on 25 May to say farewell to their Commanding Officer, Col LR Pierce, and his wife Terry. Representatives from Shilo and Moose Jaw attended

with the Winnipeg contingent. A parting gift was presented to Col Pierce by Maj IW Susser, BDentO Winnipeg. Col Pierce has been in the Winnipeg area since 1970 and has overseen (but not overlooked) sizeable changes in 14 Dental Unit.Both Col and Mrs Pierce will be missed by all members of the unit and we wish them all the best in their new posting at Trenton.

It finally happened! Sgt Nick Demedash, who has been in Winnipeg since Aug 1960, left us for Comox BC. Nick has been in Winnipeg for so long it was suspected he was an original Selkirk Settler. Best of luck to Nick and Marion in their new locale.

PRAIRIE PATTER

Congratulations to Capt Roger Johnson, one of our new dental officers, on being awarded a Gold Medal by the University of Manitoba for "Baccalaureat es Sciences, Dentistry". Gold medalists must have at least a 3.3 average of a possible 4.0 in their graduating year ... WO Hugh McKinnon's daughter Janie has become a new addition to the Forces. Janie graduated from Cornwallis on 10 May and is now in training as an air traffic controller ... Cpl Gary Bowman and his wife Helen

COL PIERCE PRESENTS: *(left) CD to Sgt DW "Tiny" Griffiths who recently returned from a tour of the sunny Mediterranean and (right) Clasp to CD to MWO EK "Gene" Abernethy of the Winnipeg dental clinic.*

The MEDLEY MOLARS, reported on in the April 1974 issue, have been identified. This photo was submitted by them with a denial that they were "suited up" for patients when it was taken.

have achieved another "first" for the CFDS and very likely in the Forces. Gary has been appointed Chairman of the Namao Junior Ranks Club and Helen was elected Vice PMC. This combination should maximize mixed functions and minimize stags.

SPORTS

Capt Terry Rawlyck participated in a black powder shoot at Tofield Alberta on 19 May and received two trophies in competition with 68 other shooters. The trophies were for second place standing in both black powder cartridge pistol at 25 yards and cartridge rifle at 100 yards ... Cpl Don MacKay's daughter was selected for the City of Edmonton All-Star Girl Hockey Team. At first it was thought she took after her father, but on reflection we realize there is conclusive evidence she doesn't. She's young, slim and good-looking.

15 Dental Unit

by Lieutenant M Gelinas

EXODUS

This seems to be the year of the great exodus of dental personnel - certainly from the Montreal and St Jean areas. On 20 June members of the CFDS in Montreal feted departing members - some posted to other units, some to other locations and one (Capt Simoneau) on release from the Forces. Maj Nadeau had already departed for the sand dunes of Egypt before the party took place. On 8 May a farewell party was held at CFB St Jean to honour Maj Arpin, MWO Torrens, Capt Ayotte and Cpl Rheault.

POSTED: (left to right) seated; Capt R Savoie, 1 DED; WO D Adcock, 12 DU Shearwater; Maj Bisaillon, Dental Det Valcartier. *Standing:* MCpl D Hurley, CFDSS; Lt M Olinik, 1 CGMU Petawawa; CWO M Beauvais, CFDSS; Capt J Simoneau, release; Cpl TJ Parent, St Jean; MCpl GC Beaulieu, Bagotville; Sgt F Schuh, Chilliwack.

TO MOSCOW

LCol Begin and Cpl Brisebois were in Moscow 10-27 May to provide dental treatment for the Canadian Embassy staff. The enjoyed the trip in general - the Bolsho the Moscow Circus and the warm reception

(Left) Col MacDougall presents the CD to Maj J Nadeau while Sgt R Garnhum, who received his CD at the same ceremony, looks on. (Right) Capt Savoie congratulates MCpl Beauchamp on receiving the CD.

from Canadians there. However, they said that they wouldn't be keen on a prolonged stay. Enoff is enoff, Ivanoff!

ORAL HYGIENE INSTRUCTION

Maj Al Gaudet, assisted by MWO Pelletier and WO Audet (hygienists) and some of the dental assistants on staff conducted a program of oral hygiene instruction for 1,200 students at DND schools in CFB Valcartier. Assistance in this program was provided by the Quebec Department of Social Affairs which supplied consummable items for each child. In addition to tooth brushing, the children were exposed to a demonstration on flossing and "volunteers" used disclosing tablets. The program was highly successful and will be continued next year.

STAFF SHOT

The St Jean clinic staff attended annual small arms classification during June. The best shot was MCpl Riel with a score of 81.

ARMED FORCES DAY

CFB St Jean celebrated Armed Forces Day on 28 June. The dental staff prepared and manned a commendable Preventive Dentistry display. A mobile dental van from Valcartier was used to demonstrate our field capability.

SPORTS

WO Matt Hall from 15 Unit supply section took first prize at the CFB Montreal Golf Tournament held 10 June. His score was 75. Just a warm-up for Trenton in September!

35 Field Dental Unit

by Sergeant BF Hannay, CD

FAREWELL

A unit get-together was held at the Gasthaus Damenmuhle to say goodbye and good luck to personnel leaving the Lahr area: LCol Donely and Sgt Gilkes to 1 Dental Unit Ottawa; Maj Ringland to CFB North Bay; Capt Gish to Lacombe Alta(on retirement); MWO Bleakney to Gagetown; MCpl Jones to CFDSS; Mrs Hoy to CFB Chilliwack. And from the Baden detachment: Maj MacInnis on oral surgery training to Fort Lewis, Washington; Sgt Williams all the way to Lahr.

FLYING HIGH

Maj Ed MacInnis has become the third student of the Baden Flying Club to achieve solo status. His instructor, Capt Ian Stenberg, who at the time was safely on the ground, is reported to have offered the following comment:

"I just had to solo him solo; he's not safe to fly with. He kept insisting the front seat is very uncomfortable and it would be much improved if he had a parachute to wear. Sensing a hidden meaning, I told him not to worry. He had been taught take-offs and, once he got airborne, I had faith he would come back down. To bolster his confidence I advised him to consider the situation this way: 'You have just completed three very poor landings. The odds are that the next one has got to be better.' Seeing him losing his confidence, I quicky added, 'If you can't bring yourself to complete the landing, do your final approach very low over the Rod and Gun Club and we'll have someone shoot you down.'

SPORTS

Capt Paul "Fleetfoot" Greenacre led all 35 FDU personnel in the mile and a half

"walk & run" with a time of 9:15 ... Sgt Hannay captured the Lahr Handicap tournament with a blazing 67 ... Eat your heart out, Maj Ames.

Dental Services NDHQ

BGen LG Craigie served as the Reviewing Officer for the Warrant Officers Qualifying Course No. 7402 at the CFWOS, Esquimalt, 9 April.

1 Dental Equipment Depot

by Lieutenant JJL Lamontagne, CD

TEMPORARY DUTY

Cpl AM Wilson visited dental clinics at Lahr and Cyprus 19 May-6 June. The visit to Lahr was to liaise with DEM Techs at 35 FDU and to Cyprus to instal and demonstrate new field equipment ... Cpl Wilson and Cpl RG Duffield visited CFS Ramore 12-14 June to remove the dental equipment from the clinic and return it to 1 DED.

RETIREMENT

Maj MB Fisk commences his terminal leave 12 July and will leave the Forces 15 September. Capt JR Savoie from 15 Dental Unit will replace him.

WEEKEND WOES

WO EA Duve and Sgt CE Schmelzle were involved in an auto accident enroute to Ottawa 21 June. WO Duve suffered broken ribs and head lacerations. Sgt Schmelzle broke his collarbone. They were release from NDMC after receiving emergency treatment.

SPORTS

The curling season was terminated (and celebrated) with a banquet held 26 April Maj Fisk and Lt Lamontagne won trophies for being part of the grand aggregate winning rink ... A fishing derby was hel in June with personnel of 1 DED, CMED, and 13 Dental Unit Petawawa detachment hook-and-lining.

PROFESSIONAL TRG

US NAVAL DENTAL SCHOOL, BETHESDA

Complete Dentures, 25-29 March
Maj KP Buchholz

CDN FORCES TRG

CF DENTAL SERVICES SCHOOL

Clinical (General Dentistry) 17 April-1 May
Maj IW Susser, Maj HK Meisner, Capt HV Ferber, Capt DF Graham, Capt MW Freedman.

DEMT PL4 (Phase 2) 3 June-20 September (Phase 1 was conducted at CFSAOE 22 April-31 May)
MCpl JP Oakley, Cpl JD Hopkins, Cpl DJ Morphett, Cpl GJ Gallagher, Cpl JR Cornett, Cpl HGC Habberjam.

CF SCHOOL OF INSTRUCTIONAL TECHNIQUE

SIT 1, 21 May-6 June
Maj RCA Fearon, Sgt VG Bigras

SIT 2
WO TJ Deloughery, *27 May-7 June*
Maj GA Ames, *10-26 June*.

CF SCHOOL OF MANAGEMENT

Advanced Management, 22 April-10 May
Maj JL McNeill, Maj CJ Boston

CF WARRANT OFFICERS SCHOOL

Warrant Officers Course,16 April-29 May
Sgt PJ Armstrong

CFB GAGETOWN

Land Environment Trg, 14 May-12 June
Capt JCAY Ayotte

CFB EDMONTON

Basic Parachutist Course,15 April-10 May
Capt PD Higgins

TRG with INDUSTRY

JF JELENKO, NEW ROCHELLE, NY

Porcelain to Metal Restoration, 13-15 May
Sgt BF Hannah, MWO JE Raymond

SS WHITE, HOLMDEL, NJ

Dental Service Class, 17-21 June
Sgt EJ Schultz

PROMOTIONS

Major: PR Wooding, GA Ames, JJ Lemieux

Warrant Officer: RJ Tremblay

Corporal: TC Rocco, CA Hawkins

HONOURS & AWARDS

FIRST CLASP, CANADIAN FORCES DECORATION
MWO EK Abernethy, MWO VR Kidd

CANADIAN FORCES DECORATION
Sgt MM Arbour, Sgt GG Albertson, Cpl GL Payette, Sgt DW Griffiths, MCpl CJ Beauchamp.

WELCOME/BIENVENUE

Belatedly we extend a hearty welcome to the CFDS and congratulate the following officers who recently graduated from their respective universities and were promoted to the rank of Captain: DG Amundrud, WS Armstrong, DJ Bays, SJN Boucher, TB Cadden, CC Cann, JAG Chaume, RL Crosthwait, JRE Curran, JGD Gagnon, AR Gauthier, BD Hamilton, RB Johnson, SR Keddy, MJ Lawton, JP Loiselle, WA Maillet, JDR Naysmith, DH Ragan, DE Rawson, RE Riley, RG Smith, RE Thomas, WB Wiseman.

We also bid a cordial welcome to: Sgt MM Franklin, Miss B Gilbert, Mrs MacDougall, Mrs C Owen, Mrs P Simmons, Cpl Skanes, Pte KL Thomas, Miss Van Amburg, and Mrs J Vaness.

FAREWELL/AU REVOIR

The best of luck to: Maj DL Brown, Capt JM Cherun, Sgt JR Curtis, Mrs CJ Evans, Maj MB Fisk, MCpl HB George, Capt RY Gish, CWO AJ Greco, Mrs DM Hemphill, Cpl SV Hills, Capt DM Hodges, Capt DK MacKenzie, Cpl LC Nartyn, Cpl RW Mullin, Capt CN Murray, Cpl JN Paradis, Miss J Pelletier, Capt P Psaila, MWO Reid, Miss E Reimer, MWO SE Robertson, Mrs C Stark, Capt JC Steel, Mrs A Stewart, Maj JJ Walker, Cpl B Clarke, Capt D Watson.

VITAL STATISTICS

MARRIAGES

Congratulations to: Miss Francine Durand and Cpl JB Genest.

BIRTHS

And congratulations to: Capt and Mrs T Rawlyck (son); Sgt and Mrs OW Mandrusiak (daughter); Capt and Mrs F Giesbrecht (son); MCpl and Mrs JL Violette (daughter); Maj and Mrs GA Ames (twins); Capt and Mrs LJ Hudgins (son); Sgt and Mrs NL Highfield (son); Cpl and Mrs BC Kilgrain (son); Capt and Mrs RPE Alberti (daughter); Cpl and Mrs NA MacLeod (daughter).

CONDOLENCES

Deepest sympathy is extended to: Sgt AF Randall, LCol JY Turcotte, and MCpl GC Beaulieu on the loss of their mothers; Sgt Gratton on the loss of his father; Maj A Gaudet on the loss of his father-in-law.

The CFB Shearwater dental clinic staff captured on film during a recent unit function. (Left to right) Front row: Capt Ferber, Maj Gray (BDentO), Capt Bullock. *Back row:* Cpl Buchanan, WO Peverill, Mrs Bader, Sgt Pink. Missing are Sgt Mackie and Pte Pero. Sgt Pink was recently elected to the office of Registrar for the Dartmouth Branch of the Kinsmen Club.

Reprints of Major H.S. Wood's article "A Study of the Dental Condition of the Canadian Armed Forces in 1973 and its relationship with the Preventive Dentistry Program", published in the April 1974 issue of the Quarterly, may be obtained free of charge on request to the Editor.

Single complimentary copies of the full report on this study are also available.

The CANADIAN FORCES DENTAL SERVICES Quarterly

VOLUME FIFTEEN • NUMBER THREE • OCTOBER 1974 •

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The CFDS Quarterly

•VOLUME 15 • NUMBER 3 • OCT 1974•

Published by authority of Brigadier-General L.G. Craigie, CD, QHDS, DDS, FICD, in April, July, October and January, the Quarterly serves as a means for the exchange of ideas, experiences and information within the Canadian Forces Dental Services. Views and opinions expressed are those of the authors and not necessarily those of the Director General of Dental Services or the Department of National Defence.

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Second and Third Phases DOTP visited by BGen LG Craigie, DGDS, during Camp Ipperwash field exercise, 9 July 1974.

See page 5

Subscription: $6.00 per year. New subscriptions or renewals, accompanied by cheque or money order made to "The CFDS Quarterly" should be sent to:

The Director General of Dental Services,
National Defence Headquarters,
Ottawa, Ontario, Canada.
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VENTED CROWN CEMENTATION TECHNIQUE

Major R.C.A. Fearon, DDS

One of the most discouraging experiences associated with full crown restorations is to find, after cementation, that there is a "cement line" at the margins when, at "try-in", it had been established that the crown was accurately fitted and could be fully seated. Such discrepancies at the gingival margins are caused by cement being trapped in the occlusal portion and having no way to escape.[1] The problem occurs most frequently in full crown preparations of long, slightly tapered abutments, such as bicuspids.

The difficulty can be overcome by venting the crown and a good technique to accomplish this was recorded in the literature some time ago.[2] Its superiority has been verified by laboratory studies.[1] The procedure involves the placement of a hole in the occlusal surface of the crown to allow excess cement to escape and thus permit full seating of the restoration. The hole is filled later with either gold foil, which is time consuming, or amalgam, which has a colour disadvantage. To overcome these undesirable features, the Canadian Forces Dental Services School has modified the technique in the following manner.

Step 1 – Vent Hole Placement

After the crown has been "tried-in" and deemed ready to cement, select an area on an occlusal slope of the crown which has a minimum thickness of 1.5 mm of gold. This thickness is required to provide a positive seat for the vent pin. Ideally, the selected area should provide access to the highest point in the table of the preparation

Figure 1

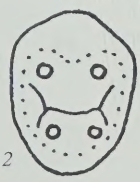


Figure 2

(fig 1 – solid arrow) but, since the most important criterion is the thickness of gold, another area may be selected (fig 1 – broken arrow). In general, one of the four sites shown in fig 2 should be utilized.

Using vaseline-lubricated burs at low speed, first make a hole at the designated point with a #2-round carbide bur and then create a taper to the hole by means of a #699 tapered cross-cut fissure bur, approaching in both instances from the outer surface of the restoration.

Step 2 – Vent Plug Fabrication

Prepare a selection of tapered pins cast in Type B (soft) gold, using tapered plastic bristles from a shower scrub brush as patterns. Choose one which fits snugly and extends to the inside surface or beyond. Fit it in the vent hole and rotate it (fig 3) to burnish the gold and improve the fit. Remove

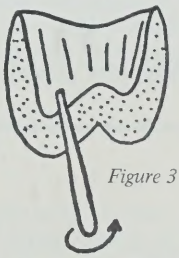


Figure 3

Figure 4

the pin and cut off the excess length internally. Complete the preparation by placing a notch about ½ mm above the occlusal surface (fig 4). Be certain that the plug fills the tapered vent hole but does not project through the crown and make contact with the abutment surface.

Step 3 – Cementation

Mix the cement, fill the crown and place it on

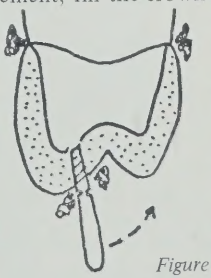


Figure 5

the abutment in the usual manner. Allow the excess cement to escape through the vent hole. When the crown is completely seated, insert the gold plug to its full depth in the vent hole and twist off at the notch (fig 5). The technique may be varied by preparing the pin without a notch and cutting off the excess occlusal length with pliers.

Step 4 – Finishing

After the cement has set, reduce the projecting portion of the plug with stones and rubber wheels and then polish the surface.

Summary

One of the vital components for success of cast full crowns is a good marginal fit. However, experience clearly demonstrates that the closer the restoration fits the prepared tooth the more necessary it is to vent the crown to permit the escape of excess cement from the internal occlusal region. The technique described is both effective and easy and it can be accomplished with a minimum expenditure of time and materials. The vent hole can be located, prepared, and the pin fitted in about five minutes by the dental officer. Alternately, laboratory personnel can carry out all these preliminary steps prior to the "try-in".

References

1. Bassett, R.W. Solving the problems of cementing the full veneer cast gold crown. J. Prosth. Dent 16:740, 1966.
2. Jones, M.D., Dykema, R.W., and Klein, A.I. Television micromeasurement of vented and non-vented cast crown marginal adaptation. Dent. Clin. No. Amer. Vol 15 No 3, 663-678, July 1971.

PREVENTIVE DENTISTRY CENTRE CFB HALIFAX

Major J.W. Jolly, CD, DDS, DDPH

Background

The CFB Halifax dental detachment is responsible for the care of approximately 7,000 servicemen located in ships and various other widely spread places throughout the area of Halifax. It is virtually impossible with such a dispersed commitment to gather large groups of them together at one time so, despite various approaches, the mass brush-in method of providing Phase I treatment has never proven effective. It was found necessary, therefore, to rely on the personalized one-to-one format to render this preventive service.

The concept of a Preventive Dentistry Centre (P.D.C.) was first considered in 1968, following the author's liaison visit to U.S. Navy dental facilities in Norfolk, Virginia, where he studied delivery systems used in their preventive program. The proposal for such a Centre was included in the CFB Halifax base development plan as a part of a large central clinic. It was recognized early, however, that it would be several years before such an ambitious plan could be implemented and that, in the meantime an interim Centre was required.

Numerous attempts to acquire suitable accommodation for a temporary Centre proved fruitless until, in the spring of 1973, space was allotted and the decision was made to construct the P.D.C. even though the accommodation was smaller than desired and was not centrally located. Following the usual problems encountered with such renovations and in obtaining various supply items, the P.D.C. opened on 3 Dec 1973.

Physical Attributes

The Preventive Dentistry Centre consists of three treatment bays and an audio-visual room. This room is sufficiently large to accommodate groups of up to eight personnel for oral hygiene instruction and practice and is also used as office space. The three small treatment bays are set up with pump chairs, roll-around motors and cuspidors, which have been ingeniously modified to incorporate air and water syringes and Cavitron connections.

Two of the bays are used exclusively for prophylaxis and contain Cavitrons. The third bay is fitted with X-ray equipment and is used for

examinations, X-rays and proplylaxes. A portion of a hallway has been furnished as a waiting room. While not palatial or completely satisfactory, this limited accommodation permits the Centre to function adequately.

Staff Functions

The Centre is currently staffed by one Dental Officer, two Hygienists and one Dental Assistant. The Dental Officer provides detailed annual examinations for all patients and is otherwise engaged in education, scaling, prophylaxis, administration and, when possible, the initial and final plaque control appointments.

The Hygienists do most of the scaling, proplylaxis, and instruction on the one-to-one basis. They also apply topical fluoride, take X-rays and, time permitting, conduct plaque control exercises.

The Dental Assistant is responsible for a great deal of the group education and fluoride applications. He also takes X-rays, and sometimes is responsible for plaque control recall appointments.

In order to make the Centre function well it is vital that the staff be healthy, hard-working and dedicated. As in all clinics, leave, illness and temporary duty affect the operation of the Centre adversely and greatly reduce the number of patients that can be handled.

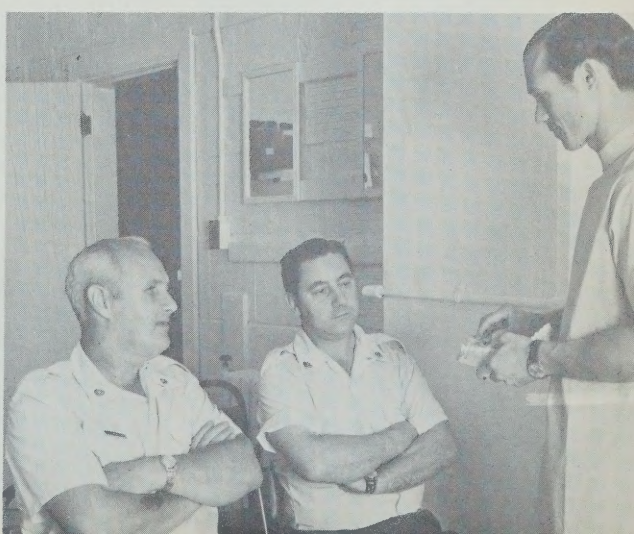
Preventive Program

The goal of the Centre is to provide, in the most effective manner possible, annual Phase I treatment to all personnel dependent on CFB Halifax for dental care. Although the optimal solution to this goal rests in a personal relationship between the dental officer and an individual patient, staffing precludes reliance on such a method and the group approach must be used to one degree or another. As a compromise, the Centre provides instruction in oral hygiene to small groups after which the members receive an individual prophylaxis.

On arrival at the Centre the group receives an illustrated lecture on oral hygiene and the Preventive Program, followed by a demonstration of proper brushing and flossing procedures. Each patient then has the opportunity to practice flossing and brushing under supervision, following which he receives an oral examination and X-rays as required. An individual prophylaxis is then provided as well as a fluoride application if his age or caries activity warrants it.

Results to Date

The Centre has provided Phase I treatment to nearly 2200 personnel in eight months. For the first month of operation the patient load was deliberately kept low to enable the staff to develop the best possible flow patterns. During Atlantic Fleet exercises and the summer posting and leave period, patient availability has not been good and the numbers treated have fallen below the Centre's anticipated potential. It is felt, however, that the results are satisfactory and it is anticipated that after the first year of operation 3500 personnel will have had the benefit of receiving the best Phase I treatment that the staff and accommodation available can provide.



(Left) Author in examination and X-ray bay (Right) Cpl RA Powell *demonstrates brushing method to MWO Ash and MCpl Martell in audio-visual room.*

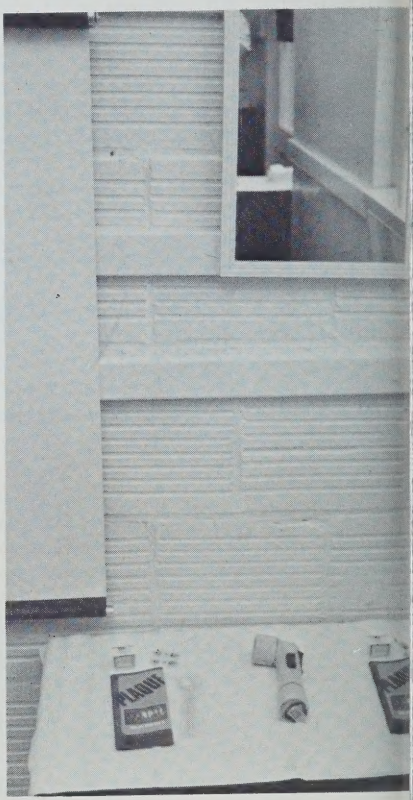
Problems

The chief problems, which prohibit the Centre from reaching its goal of treating all 7000 potential patients, are created by lack of space and insufficient dental personnel. Without expanded accommodation and establishment there is no solution to these problems. The lesser problems of patient availability, temporary shortages of stores and elderly equipment are not insoluble, but they are frustrating.

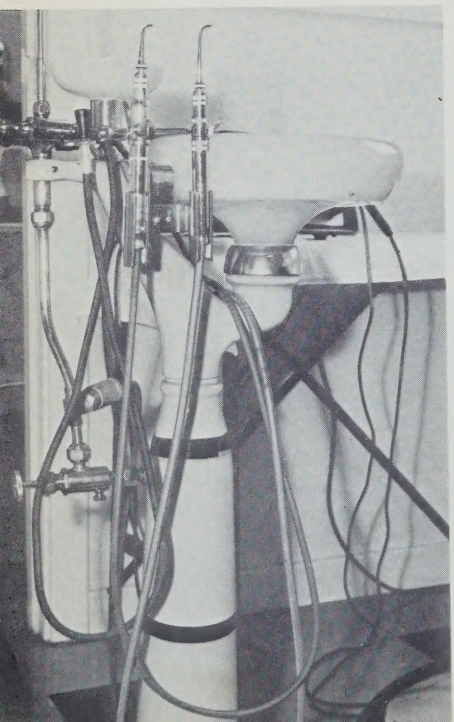
It is envisaged that the addition of one hygienist and two dental assistants to the staff would solve the personnel problems while three additional treatment bays would correct the space insufficiency. When such additions are made, the Centre should be able to fulfil its ultimate function.

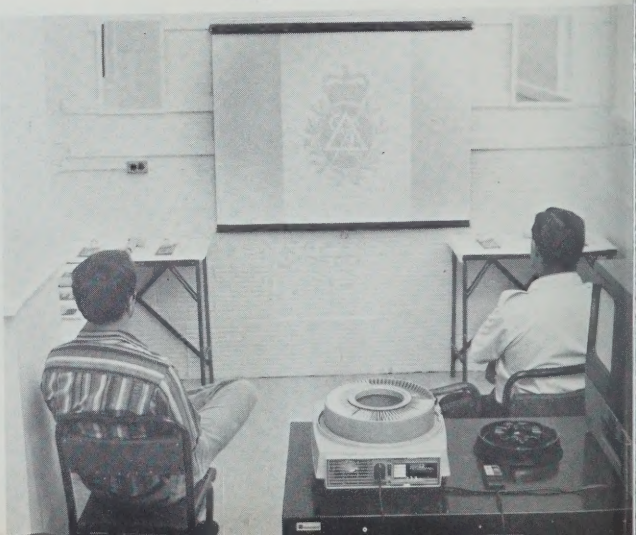
Summary

The background function, accomplishments and the problems of the Preventive Dentistry Centre at CFB Halifax have been presented. The Centre has proven to be a valuable and viable means of delivering thorough Phase I treatment to small groups of patients and it is sincerely hoped that the means will be provided through which the Centre can eventually reach its worthwhile goal of providing such care to the entire patient commitment of this polyglot Base.



(Left) Modified cuspidor showing air and water syringes and cavitron quick coupling
(Upper right) Oral hygiene practice area in audio-visual room
(Lower right) Patients receive illustrated lecture in A-V room.





BGen Craigie, accompanied by the Parade Commander, 2Lt Fallon, inspects the parade.

DOTP GRADUATION

by Captain R Haines, CFDSS.

The Second and Third Phases DOTP graduation parade and mess dinner were held at CFB Borden in August. Following the inspection and march past, **BGen LG Craigie** addressed the graduating classes and presented the awards and certificates.

2Lt WH Fallon, (University of Manitoba) won the Third Phase honour trophy; the runner-up prize went to **2LT PM Lobb** (University of Alberta).

The Second Phase honour award was won by **2Lt BR Taylor** (University of Western Ontario). **2Lt ML Irwin** (University of Alberta) received the runner-up prize.

2Lt JL Bilodeau (University of Alberta) was awarded the CFDSS Chief Instructor's trophy.

2Lt GJ Meisner (University of Toronto) and **2Lt JR Cormier** (Dalhousie University) - Second and Third Phase respectively - were presented with the Field Exercise trophy for their most significant contributions to the success of the Ipperwash exercise.

After the parade BGen Craigie, members of the graduating classes, the staff and their ladies attended a garden party at the Waterloo Officers' Mess.

BGen Craigie was the guest of honour at a mess dinner held the evening before the parade - (and that's not cricket) - where he was presented with a photograph of the 'troops' taken when he visited the Camp Ipperwash field exercise.

Capt Bob Salois and **Capt Ron Haines,** Third and Second Phase course directors were presented with momentos of the summer by their phase members.

Next page:
Top - 2Lt Fallon, *Third Phase Honour Cadet*
Centre - 2Lt Taylor, *Second Phase Honour Cadet*
Bottom - 2Lt Bilodeau, *Chief Instructor's Trophy*

CANADA

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12th Annual CFDS Golf Tournament

The 1974 version of this classic event took place at CFB Trenton on Thursday and Friday, 12-13 September. In the eyes of most of the 85 participating golfers and the additional 25 who attended the banquet, it was a pleasant and successful venture, in spite of the heavy rainstorms on Thursday and the high winds on Friday (the 13th!).

Since this was the first time in more than five years that the tournament dates coincided with inclement weather, no alternate contest had been planned. For the future, it is possible that the tournament may be designated a scuba-diving or sailing event - if necessary. In an attempt to forestall the latter, it is planned to have both ATC Command Chaplains attend the 1975 tournament as guests.

In spite of everything, we hope to see you all again next year!

The Winners

RCDC(R) Officers' Trophy - 14 Dental Unit
KM Baird Trophy - WO (Ret'd) W Hill
GR Covey Trophy - Maj G Bisaillon
Tournament Net Prize - Maj A Marcil
1st Low Gross 1st Flight - LCol(Ret'd)B Carter
1st Low Gross 2nd Flight - LCol G Windsor
1st Low Gross 3rd Flight - WO JR Deblois
1st Low Net 1st Flight - Cpl G Lamontagne
1st Low Net 2nd Flight - LCol (Red'd) AG Andrews
1st Low Net 3rd Flight - Sgt BF Hannay
2nd Low Gross lst Flight - MWO R Todd
2nd Low Gross 2nd Flight - Capt N Roy
2nd Low Gross 3rd Flight - LCol N Andrews
2nd Low Net 1st Flight - WO M Hall

2nd Low Net 2nd Flight - Maj H Wood
2nd Low Net 3rd Flight - Capt R Woodworth
3rd Low Gross 1st Flight--- Mr B Pollock
3rd Low Gross 2nd Flight - Sgt P Harkin
3rd Low Gross 3rd Flight - Capt RS Sorochan
3rd Low Net 1st Flight - Sgt WL Garnett
3rd Low Net 2nd Flight - Maj (Ret'd) J Walker
3rd Low Net 3rd Flight - LCol M Deyette
Closest to hole Thursday - WO D Davies
Closest to hole Friday - BGen (Ret'd) KM Baird
Longest Drive, Thursday - Maj M Pilon
Longest Drive, Friday - Capt G Boulanger
Most Honest Golfer - WO J Giroux
Golf Bag Draw Winner - Sgt R Black

BGen Craigie presents the RCDC(R) Officers' Trophy to 14 Dental Unit team (left to right) *Capt DR Wright, Maj RH Headley and Cpl GR Lamontagne, for lowest gross aggregate score over 36 holes.*

WO (ret'd) W Hill presented the KM Baird Trophy by BGen Baird for low gross score over 36 holes.

Maj G Bisaillon presented the GR Covey Trophy by Col LR Pierce for low gross score over 18 holes.

Maj A Marcil congratulated by Col Pierce for winning the tournament low net trophy.

(See pages 12-13 for Kings and Queens of Swing and Swot)

CF Dental Services School

by Captain RS Haines

Visits

During the summer **BGen Johnson,** Chief of Staff Training Command visited the School on 6 June; **Dr WG MacIntosh,** Executive Director of CDA, was a guest lecturer on 22 July; and **Dr R House,** of the Royal College of Dental Surgeons, B.C. on 29 July. **Col Richardson** attended the Training Command Conference 12-14 June.

Sports

A tabloid sports day on 26 June tested the skills of four teams. The Third Phase candidates (Team 1), supported by **Capt Salois** and **Capt Haines** outpulled the Lab Course Team 4 in a tug-of-war to break a tie in point accumulation. The winning team members were each presented a Newfoundland nickle award. The School staff officers formed Team 3 and Third Phase candidates Team 2.

The second annual **Wally Mitrikas Memorial** golf tournament was held 19 July. It was an enjoyable day of golf and a social evening attended by the wives and girlfriends of all competitors.

This year's winner of the Mitrikas Memorial Trophy was **MWO Roy Todd.** First low net was captured by **WO Doug Davies.**

Retirement

Chief Warrant Officer WD (Bill) Morris of Barrie, Ont., began his retirement leave recently after 34 years in the CF. He had been with the CFDSS since 1964.

Bill joined the RCAF in October 1940 in Bradford, Ont. He transferred to the Dental Corps in 1942 and in 1946 he returned to civilian life where he participated in the activities of the RCDC reserve.

In 1950 he rejoined the Regular Forces in Montreal and served as a dental equipment maintenance technician in Ottawa, Borden and Petawawa.

For the past ten years he has been the principal instructor and designer of DEMT courses at the School. This is the only comprehensive dental equipment maintenance course offered in Canada and CWO Morris is the author of two manuals for the trade.

CWO Morris was appointed the School Warrant Officer in 1969. He wears, among other medals, the CD with clasp and the Centennial Medal.

Chief Morris's expertise in and dedication to his job will be missed by the CFDS and we wish him the best of luck in all his future endeavours.

1 Dental Unit

by Sergeant MY Fletcher

Welcome

As summer comes to an end we find many new faces in the Ottawa area. A special greeting to our new CO, **LCol Donely and his family,** just in from Europe. LCol Donely didn't waste any time "digging in" and is already well entrenched in the bureaucracy of the unit ... Also in from Europe is **Sgt Bev Gilkes.** Bev reports she has exchanged her "castle" in Europe for a "dungeon" in Vanier ... **Capt Cameron Croll and wife Juanita** have arrived from Comox. Leaving the blue Pacific behind wasn't easy, and Cameron can still be heard to mutter "what did I ever do wrong..." ... **Cpl Mary Forlippa** joins the Ottawa (S) clinic from CFB Halifax. Mary's husband is at present finishing his tour of sea duty. His latest word from San Diego is "I'll be home for Christmas - perhaps" ... **Cpl Pat Searle** is settled in at the NDHQ Lab on completion of her PL3 Lab course at Borden.

Farewell

Cpl Wayne Leach was wined and dined by the NDHQ staff before leaving for CFB Halifax ... **Maj Yvon Cyrenne,** after many trips to and fro, finally set up housekeeping in Toronto where he'll be attending Staff College for the next year. He received

a CFB Uplands crest from the clinic staff as a reminder of days gone by ... **Ms Mary Ellen Jensen** has chosen greener pastures and after ten years service has left DND for DVA ... The retirement of **Sgt Helmut Markwort** was the excuse for a unit BBQ at CFB Ottawa (North). Helmut has been with the CFDS as a lab technician for 20 years. He and his family will continue to reside in Ottawa.

Sgt Helmut Markwort is presented with plaques from the Sergeants' Mess and CFB Ottawa. With him (left to right) are WO Rene Tremblay, MWO Earl McFadden and LCol Chatwin.

Senior NCOs honour LCol Chatwin with a farewell dinner. (Left to right) seated: MWO Roy Jones, LCol Chatwin, MWO Earl McFadden, WO Rene Tremblay. Standing: Sgt Donna Hollins, Sgt Helmut Markwort, WO June Patterson, WO Art (Jesse) James, Sgt Muriel Fletcher, Sgt Ron Lindsay.

CO Retires

LCol JVP Chatwin ended 23 years of service in the CF at the end of September. "Tiny" and family will remain in Ottawa where he will become Director of Dental Health Services at Algonquin College. LCol Chatwin will be long remembered as the man who was "short" on the phone and "long" in heart.

Certification

WO Henry King recently received his certificate as a Registered Dental Hygienist after writing board exams at the University of Western Ontario in June ... **Cpl Diane Nolet** is a recent recipient of ODNAA national certification.

Wedding Bells

Capt Dave Rowat and **Miss Margret Mutch** were married 17 August at Maxville, Ont. They lived dangerously on a camping honeymoon in Dave's old stomping grounds - P.E.I.

Wind-Up

Maj Rod Carver recently pitched the NDMC fast ball team all the way to the semi-finals. The finals? ? That's next year's challenge ... **Sgt Donna Hollins** was off to the Maritimes for some "sun and fun". Donna reports she did well on both counts ... **Capt John Currah and wife Muriel** are off on a five week European vacation which will include Copenhagen and Amsterdam ... Friday the 13th wasn't unlucky for **MWO Earl McFadden,** winner of the annual Christmas Bottle draw - nor was it for the rest of the CF with the announcement of the pay raise. Everybody happy? - well, happier?

11 Dental Unit

by Sergeant RW Boyd

Headquarters

Now that Labour Day is behind us the HQ staff are busy trying to keep up with the ever-changing fares and time tables for the various transportation companies, as the fall visit to our exotic clinics must be attended to before too much of that white stuff arrives.

During the last month we have had many visits from our friendly CE people as they do the ground work before beginning work on our new Lab and Preventive Dentistry centre. No firm commitment date has been mentioned yet.

Sgt Boyd found himself in the favourable position of being nominated and accepted for a Global response flight bound for South America. He departed Trenton, headed south on the morning of 12 August along with 21 other jovial members of the CF aboard a 707. The return flight took six days with stops at Rio de Janeiro (2 nights), Buenos Aires (2 hours), Santiago (1 night), Lima (1 hour), and Mexico City (2 nights). The trip was conducted on a very informal basis which allowed all on board to thoroughly enjoy one another's company both in the air and on the ground. Highlights of the flight were tours of Rio de Janeiro and Mexico City, both beautiful cities with much to offer the visitor. Sgt Boyd is now the proud possessor of a certificate testifying that he has crossed the Equator, was presented to King Neptune's Court and is a full fledged member of the "Winged Order of Neptunes Rex".

Second Clasp to CD

CWO John Greco is presented with the second clasp to his CD by **LCol Al Taylor.** Chief Greco enrolled in the Infantry 18 April 1942 and served for two years with the New Westminster Regiment. Then, because of a training injury, he was transferred to the Dental Corps as a driver. After WW2 he got his big start in the Corps at Jericho Beach, Vancouver, with **Capt GC Evans** and "mobile Number Nine".

CWO Greco is now on rehab leave and is the course director and instructor of Camosun College Victoria Dental Assistant program.

Newly Retireds

A notation was made in the last issue of **MWO Robertson's** retirement and we felt that Stan and Fran's old friends would like to see how they looked on the occasion.

MWO and Mrs Robertson with LCol AG Taylor. The newly retireds are holding silver wine goblets presented to them by the unit.

Sports

Two of our great white hunters, **Capt Bill Jackson** and **Capt Kjeld Hansen** returned from a deer hunting safari to the far reaches of Holberg with five bucks, no pictures, but many good stories.

The CFB Esquimalt hospital ball team with three dental members, **Capt Margetts, Sgt Murley** and **Sgt Armstrong**, finished first in league play and second in the area finals.

Middle East

We have had a few letters from **Capt Fennell** and all have enjoyed his epithets and humour from Cairo and Ismailia. Following is a sample taken from his most recent letter.

Warning to Relatives, Friends and Acquaintances of "The Cairo Kid".

On the impending return to Canada of the above mentioned serviceman from Peacekeeping Duties in the Middle East

BE IT KNOWN THAT

Soon the aforementioned peacekeeper will once

(Continued on page 14)

12th. CFDS
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EMBER

again be returned to your midst. Treat him kindly and remember him as he once was, for there are strange things done beneath the Sinai sun, and gradually you will begin to notice the subtle changes which have taken place in the Peacekeeper's character. Take no alarm, for all who have served here will be subject to the same nervous twitching, blinking of eyes and an uncontrollable urge to dive for cover at unexpected noises. Apart from these general symptoms, however, the following characteristics will assist you in identifying the returning Middle East serviceman.

1. When the wind picks up, he will begin driving tent pegs around his house, apartment or MQ.

2. To turn out the light at night, he will reach up and unscrew the bulb.

3. When starting out to work each morning, he will put a roll of toilet paper in his pocket.

4. He'll go to see the same movie four times.

5. When invited to dinner, he'll take a towel and a bar of soap.

6. If he has to get up at night, he will put on combat boots and search for a flashlight.

7. He will cover the floor of his car with sandbags, and violently refuse to pull off the paved surface, even to repair a flat.

8. He'll dig a hole in the yard, put some rocks in the bottom, and install a cylindrical tube.

9. Waking up at night and hearing nothing, he will curse all generators and go back to sleep.

10. Every morning he'll take the sheets off the bed and hang them outside.

11. He will quickly hammer to death, with anything available, any creature possessing more than four legs.

12. He will keep a steel helmet on his bedside table.

13. He will dive under the nearest table at the sound of an airplane.

14. Never mention UNTSO, UN PAY, REHAB LEAVE, or CAMPING TRIPS in his presence, or you will be subjected to uncontrollable rage.

15. Never ask why all your previous neighbours who didn't go where he did, have all since been sent to the postings he has been requesting for the past six years.

16. He may brush his teeth and gargle with Canadian Club, explaining that the water is not to be trusted.

17. He will disolve into a sobbing mass if you ask him how much money he was able to save by serving the United Nations.

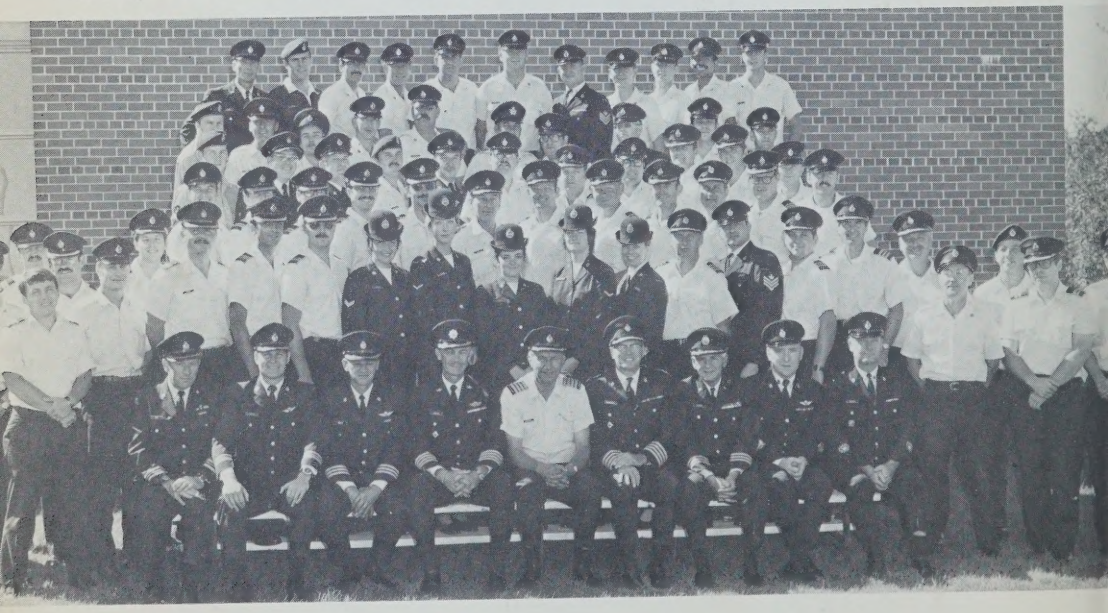
But welcome him back with patience and understanding. Perhaps, in a few months time, with proper rest and care, he may return to the reasonably normal state you remember from so long ago.

On the other hand ...

12 Dental Unit

by Captain DH Brown

Unit Conference, CFB Gagetown, 4-6 September



Unit Conference

A unit conference held at CFB Gagetown on 4-6 September was attended by 73 unit members and seven guests from Ottawa, Borden and Montreal. The conference included presentations on career management, table clinics, equipment and supplies, trades, panel discussions and organization of a field dental unit by the CO 15 Dental Unit.

An all ranks mess dinner was held after the conference followed by a golf tournament the next day.

Clinic Closed

A fire in the boatshed on 3 August closed the Dockyard Clinic and Preventive Dentistry Centre until mid-September. There was extensive smoke and soot damage. The clinic staff cleaned up the equipment and material and the Base CE cleaned up the building.

Retirement Postscript

We finally managed to get our hands on some photos taken during the retirement dinner held at Gagetown in April to honour **MWO Hewie Reid** on his retirement from the CFDS. The painting presented to Hewie by **Col Protheroe** on behalf of Hewie's friends is the work of **Cpl RC Buchanan** of the Shearwater clinic. The parcel he is holding and which was obviously presented to him by **MWO Therrien** is unidentified but looks interesting. We hope that **Mrs Reid** enjoyed her plant. Perhaps she has a 'green thumb' and has managed to keep it alive.

Gagetown News

On behalf of BGen LG Craigie and all ranks of the CFDS, the staff of the CFB Gagetown Dental Detachment presented **BGen SV Radley-Walters** ***with a framed Dental Services crest on the occasion of his retirement. His personal support, and long association with the CFDS, has been much appreciated.***

(Left to right) Cpl Petley, WO MacDonald, Capt Sasse, LCol Brogan, WO Atherton, BGen Radley-Walters, MWO Bleakney, Capt Paquin, MWO Therrien, Sgt MacLean, Capt Gauthier.

LCol HW Brogan was elected Chairman of No. 25 District School Board (Oromocto) and received considerable coverage in Fredericton's ***Daily Gleaner***. ... **2Lt Leek** and **MWO Therrien** introduced the Preventive Dentistry Program to the Royal Marines at Camp Petersville in June. They processed about 100 'Brits' and were astonished to discover that many of them did not own a toothbrush and had never heard of fluoride or seen dental floss.

Here Come The Swingers!

by Corporal Buck Buchanan

On 25 June at Hartland Golf Course (The Course by the Sea), the Halifax-Shearwater area held their annual golf tournament - only, this year, with a bit of a twist.

Monkey Golf was the game of the day and as was found - the non-golfers did as well as the pros.

Given a banana on arrival and one club per person, the foursomes set out to literally "beat the turf".

Although it rained the tournament was successfully completed and on returning to the club house a free drink took the chill out of a rather soggy, sunless day.

The organization of the tournament was superb as two non-golfers put their heads together and came up with a real fun day on the greens.

Presentations were made by **Sgt Al Pink** who acted as MC throughout the activities.

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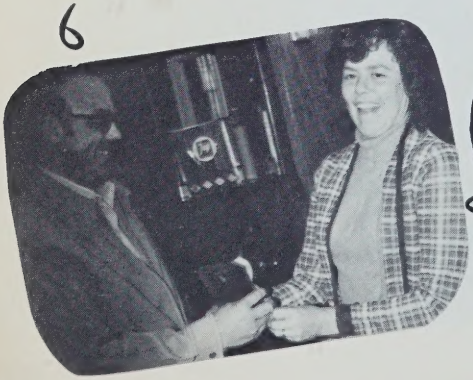
1. Capt RW Woodworth was the low net winner with a 38, and was applauded with a gorilla on a tee.
2. Capt JWG Valois took low gross with a 53 and the prize was a stone banana on a swivel.
3. Capt L Hudgins prepares to use his prize which was attained for runner-up low net.
4. Cpl Bob Clark won the hidden hole and accepts a golf counter, donated by Mr Jack Mullins of Ash Temple.
5. As runner-up low gross, Maj WA Gray accepts his prize.
6. A monkey's rear is captured by Mrs Denise Clark for the most honest golfer with 110 for 9 holes.



Sports Flashes

Apparently noon hour tennis is paying off for the Shearwater dental clinic team. On 13 August **Maj Gray** and **Capt Bullock** took the doubles hands down and Maj Gray triumphed in the singles play. This put them up for competition during 9-13 September against various seekers of 'plastic medallions' from the Atlantic Region. However, in preparing this sports flash it was found that the only competent tennis player couldn't compete that day because he had a toothache and there wasn't a dentist available ... **Cpl Al McLeod** made the CFB Gagetown fastball team, participating in the zone playoffs in Halifax ... **LCol Ian MacDonald** qualified as a member of the CFB Cornwallis golf team but was unable to attend the Regional tournament ... **Capts Smith** and **Thomas** of CFB Cornwallis have entered as a team in the Armed Forces Sailing Regatta in Kingston the latter part of September ... In July **Capt Woodworth** of CFB Halifax participated in the Cdn Forces Sailing Association Handicap series at Shearwater. His yacht ***Billie Gale*** captured first in the B class both times running.

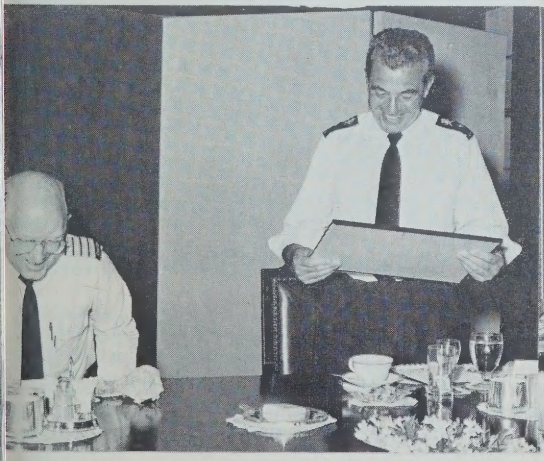
13 Dental Unit

by Captain JW Shore, CD

CFB Toronto Clinic Expanded

The official opening of renovated facilities of the Medical and Dental clinics at CFB Toronto took place on 26 June, with **Surg RAdm RH Roberts** and **BGen LG Craigie** cutting the ribbon. Tours of the facilities were made and the ceremonies concluded with a luncheon at the CFB Toronto Officers' Mess. During the luncheon, **Col Miller**, BComd CFB Toronto, demonstrated the rapidity with which the photo section carried out its duties at Toronto by presenting BGen Craigie with a framed enlargement of the opening ceremonies photograph which had been taken only an hour earlier. BGen Craigie then reciprocated by presenting Col Miller with a CFDS Crest to be mounted at the entrance to the Base Hospital.

1. Cutting the ribbon
2. Cutting the ribbon photo an hour later
3. Presenting the CFDS crest.



Community Services Award

Col CL Fox, BComd CFB North Bay, presented **LCol H Griesbach** with the Base Community Services Award in recognition of LCol Griesbach's services to CFB North Bay as Editor of the North Bay ***Shield*** and president of the Base Photo Club.

Retirement

Members of the Petawawa dental detachment bid a fond farewell to **WO Ken Libby** in August. **LCol GE Windsor** presented Ken with a silver tray on behalf of all members of 13 Dental Unit.

WO Libby proceeds on terminal leave in Aug-

ust after completing a varied career of some thirty years including service with the RCHA and RCASC prior to transferring to the RCDC in 1951. WO Libby plans to live in the Calgary area on retirement. Best wishes for the future are extended to Ken and Mrs Libby.

In Case You've Been Wondering Who's There..

CFS Moosonee Dental Clinic - Capt RE Fletcher and Sgt I Winsor

14 Dental Unit

by Sergeant A Gray, CD

Change of Command

Col JC Brick signs the document accepting command of 14 Dental Unit from Col LR Pierce as Lieutenant P Peterson looks on.

Black Pow(d)er

Capt Terry Rawlyck and trophies won during the past year in Black Powder Shoots held in Alberta.

The Wheat ...

Capt and Mrs Terry Rawlyck hosted a Ladies' Night for the Central Alberta Dental Society at the Penhold Officers' Mess recently. Music was supplied by the *Holy Molars*, a group of dentists who donate their proceeds from musical engagements to charity.

Maj Justin McNeill and **Capt Bob Sorochan** of Moose Jaw completed *Operation Hiawatha* by finishing the cedar strip canoe they started at the beginning of summer. Appropriately enough, Bob calls his canoe *T.G.I.F.* - Thank God It's Finished.

and The Chaff ...

The Winnipeg detachment held their annual mixed Two-Ball Golf Tournament at the Charleswood Golf Club on 16 August with unit personnel from Winnipeg, Shilo and Moose Jaw attending. Dinner and dancing in the evening followed an afternoon of golf. Low gross winners were **MCpl RJ Tallick** and **Col JC Brick** with low net honours going to **Sally Gray** and **Capt Dick Hunt.** This was the first occasion many of the unit members and their wives had to meet Col Brick who came to Winnipeg in July.

A beautiful day was chosen by Cold Lake pers-

onnel to hold their fourth annual Invitational Golf Tournament, open to all dental personnel in Alberta. After a hard fought battle **Capt DR Wright** emerged the winner and the recipient of the Shand-Jackson Trophy. Low net honours and the Medley Trailer Sales Trophy went to **Cpl GR Lamontagne**. The Colonel LR Pierce Duffers' Award went to **Cpl J Wesley**. An evening of entertainment and tall tales followed the golf and everyone taking part enjoyed themselves and are looking forward to next year.

1. Mr Gerald Shand, formerly with the CFB Cold Lake dental detachment, presents the Shand-Jackson Trophy to the low gross winner, Capt DR Wright of CFB Cold Lake.
2. LCol JJN Wright, Base Dental Officer at Cold Lake presents the Medley Trailer Sales Trophy for low net score to Cpl GR Lamontagne of CFB Cold Lake.
3. Cpl J Wesley of CFB Edmonton (right) accepts the Col LR Pierce Duffers' Award from WO N Cable.

15 Dental Unit

by Lieutenant JM Gelinas

Annual Conference

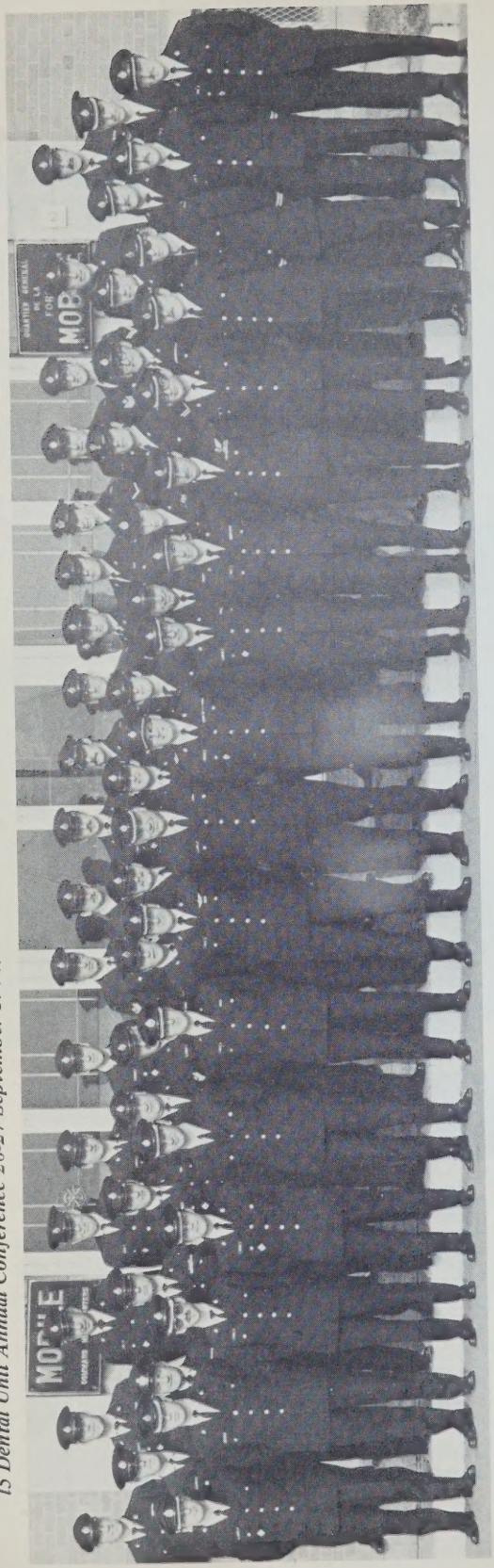
The annual Unit Conference was held 26-27 September in St Hubert. This year we took a leaf from the book of some other units and made it an all ranks conference. In addition to professional and trades presentations conducted by staff from within the unit, two career managers, **Maj Lanctis** and **MWO Adams**, spoke to groups within their respective areas of responsibility and conducted personal interviews.

The highlight of the conference was **BGen Craigie's** address to the entire assembly followed by a question and answer period.

Social activities included a barbecue for all ranks held at the Sergeants' Mess the first evening; an informal lucheon at the Officers' Mess with the DGDS as guest of honour; and finally a tournament at the Chambly golf course. It will probably come as no surprise that **WO Matt Hall** won low gross, followed by **Maj Gerry Bisaillon** and **Capt Normand Roy**.

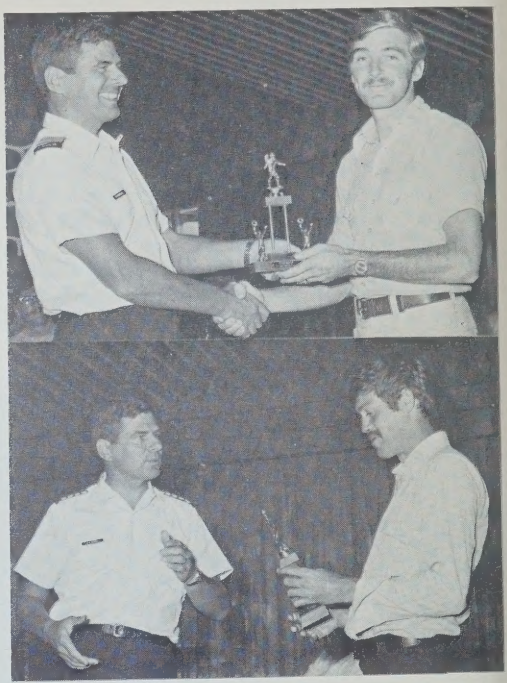
Sports

Tennis Champions. **Maj Jocelyn Lemieux** and **Capt Rodier St-Louis** have once again captured tennis honours in Eastern Region. They won the doubles competition at CFB Valcartier on 29 Aug-



15 Dental Unit Annual Conference 26-27 September 1974.

ust and represented their base in the regional tournament held at CFB St-Jean 6 September. Once again they captured the doubles title and Maj Lemieux won the singles.



(Upper) ***Maj Lemieux receives his trophy and congratulations from Col Veronneau, Base Commander CFB Valcartier***
(Lower) ***Capt St Louis receiving his trophy.***

Hunting. **Maj Jacques** made his annual safari to northern Quebec in search of moose. Not only did he fail to get his moose, but he lost his canoe and nearly lost his trailer! We're starting to wonder what a moose hunt is all about.

Failed to consult horoscope. The month of September was not too favourable for **Pte Bob Levesque** of CFB St Jean. His first sad experience was to have his nose broken playing softball, and then later in the month his car engine burned out. Both are now undergoing repairs.

Regional Marathon Race. **Maj Lemieux** was a member of the Base Valcartier team for this event held at CFB St Jean 18 September. He ran the course -- 13 miles -- in 1 hour 27 minutes. A very creditable showing for which he won 7th place out of 44 contestants. How is **your** physical fitness program?

Russian Ship Cruise

Sgt Al Larouche and his wife enjoyed a cruise aboard the *Alexander Pushkin* through the Gulf of St Lawrence to St Pierre and Miquelon and also up the Saguenay.

Narrow Escape

Maj Al Gaudet, Base Dental Officer St Hubert, recently avoided serious injury when a school bus crossed into his lane while approaching from the opposite direction. This resulted in the complete write-off of his car but fortunately he was wearing his seat belt and suffered only minor injuries. Maybe the school bus driver was reaching for his Anacin.

35 Field Dental Unit

by Sergeant BF Hannay, CD

Visits

BGen Quinn, Commander Canadian Forces in Europe, accompanied by **Col Ogilvie,** COS/BComd, visited HQ 35 FDU on 9 August.

Training

Capt Graham and **Cpl Bowering** provided dental support for 4 CMBG Munsignen concentration 24 July-7 August ... Hohenfels concentration and Exercise Reforger starts 12 September and ends 21 October. There's bound to be dental support, but who? ... **Sgt Bev Gilkes** and her companion, **Cpl Dot Johnson,** were the only Canadian servicewomen to compete in the now-famous Nijmegen March. They successfully completed the four-day 100 mile march.

Third Annual Lahr-Baden Golf Tournament

The honour of arranging and serving as hosts at this year's golf tournament fell to the staff of the Baden detachment and, in this writer's opinion, they did a fine job of it except for one small detail - they won it. **Maj Mike Bouris** reluctantly presented the *Horse's Head* to **Maj Brian Yates** who had combined with **Capt Darlington, Capt Ayotte** and **Sgt Bernier** to win this coveted end of the trophy. I forget who all represented Lahr or just what they received for their team effort but, as individuals, a couple of them proved to be worthy representatives. **Sgt Pat Harkin** walked off with the low gross for men and **MCpl Marg Daniels** did similarly for the women. All in all, it was a real fun day for the personnel of 35 FDU.

1 Dental Equipment Depot

by Sergeant RL MacLellan

Personnel

Capt JR Savoie, new CO 1 DED, reported in from 15 Dental Unit, St Hubert, 2 July ... **Maj MB Fisk,** our former CO, departed on retirement for London, Ont 11 July. He'll be at the University of Western Ontario 1 August. We wish him well in his new environment ... **Sgt Paul Dumas** is attending a formal French laguage course at St Jean 4 September to 11 December.

Visits

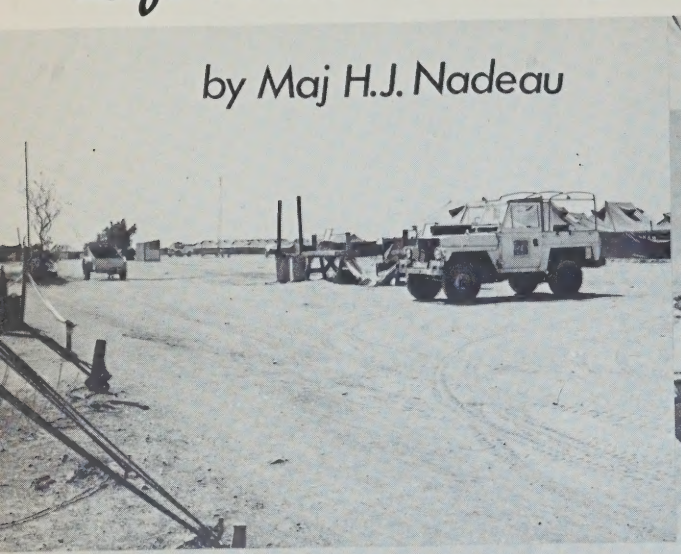
BGen RG Husch, COS Air Transport Command, accompanied by **Col JRW Wynne,** Command Surgeon, **Maj DA Harris,** SORE GOPS2 and **Capt AG Mitchell,** SO PROJ, visited 1 DED 27 September. BGen Husch was briefed on the role and responsibilities of the unit by **Capt JR Savoie** the CO.

Dental Services NDHQ

Col WR Thompson, Director of Treatment Services, was elected a member of the Commission on Armed Forces Dental Services of the Federation Dentaire Internationale during the 62nd Annual World Dental Congress of the Federation recently held in London, England.

'Life' in the Middle East

by Maj H.J. Nadeau



Where are they now?

Group III Technician Course, Camp Borden, 1957. (Left to right) Standing: **Cpl Marckwort, Pte Wilkinson, Cpl McGunigal, Cpl Bush, Cpl Krymlak, Cpl Geisert.** Sitting: **Cpl Vout, Sgt Bourgeois, LCol Kearney, LCol Evans, Sgt Wareing, Cpl Chase.** *(A class of winners - two made DGDS)*

◀ (Clockwise from top left)

The (ugh) camp in Cairo; Mohammed Fennell at the washstand; The 'Big Five' outside the clinic; Inside the clinic; Pay parade in the MIR; Sgt Ali Pouliot walking from quarters to clinic.

PROFESSIONAL TRG

Sincerest congratulations are extended to the four officers who completed their specialty training this year and are now contributing their expertise at various locations throughout Canada. They are:

Maj AR Fortier, a 1966 graduate of the University of Montreal, has qualified in Periodontics as a result of his two-year program at the University of Toronto. He is currently located at CFB Halifax.

Maj FH Harreman has completed a three-year residency in Dental Surgery with the United States Armed Forces and is now stationed at CFB Esquimalt. He is a 1965 graduate of the University of Alberta.

Maj JD McCallum graduated from the University of Manitoba in 1965 and has now completed a three-year residency program in Oral Surgery with the United States Armed Forces and is now on staff of the CFDSS at Borden.

Maj ED Cragg is also on the staff of the School following a two-year post-graduate course in Prosthodontics with the United States Armed Forces. He is a 1967 graduate of the University of Alberta.

Advanced Training

The following officers have undertaken advanced training to certification level:

Fort Hood, Texas
General Dentistry, June 1974-June 1976
Maj EF Foley

Fort Dix, N.J.
General Dentistry, July 1974-July 1976
Maj G Gunther

Tacoma, Washington
Oral Surgery, June 1974-June 1977
Maj EL MacInnis

University of Toronto
Pedodontics, September 1974-June 1976
Maj KR Morley

CDN FORCES TRG

CF Dental Services School
DEMT 724 TL6A, 16 August-6 November
Cpl GW Bowman, MCpl CJ Beauchamp, Cpl RG Duffield

Dental Therapist Adjustment Training Course, 18 September-2 October
MWO JC Therrien, MWO SL MacLean

Dental Therapist TL8 Course, 21 August-20 December
MWO JA Fraser, WO JR Deblois, WO TL Deloughery, WO LG Peverill

CF Warrant Officers School
Warrant Officers Course, 4 June-17 July
Sgt RS Black, Sgt PG Cliche

Staff College, Toronto
Staff Officers Course, September 1974-June 1975
Maj JLY Cyrenne

TRG with INDUSTRY

Williams Gold Refining Co. of Canada
Pyroplast Technique, 30 July-3 August
Sgt TR O'Mara

HONOURS & AWARDS

Second Clasp to Canadian Forces Decoration
CWO AJ Greco

First Clasp to Canadian Forces Decoration
Sgt DW Roy

Canadian Forces Decoration
Cpl(W) EW Creelman, Cpl B Hansen, Sgt P Bosch, Maj DG Jones, Cpl TW Mountain

PROMOTIONS

Lieutenant-Colonel
H Griesbach, JOL Bourget, NH Andrews

Major
LR Holland, F Giesbrecht, HA Chestnut, MS Bouris

Captain
JW Shore

Chief Warrant Officer
EM Everett

Master Warrant Officer
GN Fathers, J Hossdorf

Sergeant
JLA Violette, JF Butson, JD Likens, AD Hurley, CF Bond

Master Corporal
GG Bowser, RJ Tallack, JA Wesley, JM Chassé, LA Lambert, FN Boosamra, TJ Parent, JL St-Pierre, AM Wilson

Corporal
RD Wade, JAR Neveu, JG Bernier

WELCOME/BIENVENUE

The CFDS extends a hearty welcome to **Miss C Houde, Capt DH Brown, Pte WA Quine, Cpl ML Haley** and **Mrs CC MacLean.**

FAREWELL/AU REVOIR

The best of luck to **Ms Elsie Boileau, WO CS Brown, Miss E Bushman, LCol JVP Chatwin, Mrs MD Collier, Capt JRJ Côté, Sgt JC Doucet, Capt JA Fortier, Capt DE Fraser, Cpl(W) M Gemme, Ms Mary Ellen Jensen, Capt P Kozak, WO GK Libby, Sgt Helmut Markwort, CWO WD Morris, Cpl RW Mullin, Capt JDR Naysmith, Mrs CA Owen, Lt P Peterson, Mrs D Pratt, Capt RW Rix, Capt JBM Simoneau, MWO EV Tanner, Cpl DD Tasker** and **Sgt PD Whynott.**

VITAL STATISTICS

Marriages

Congratulations to: **MCpl(W) MFF Audet** and **Cpl John Hartley; Miss Normande Roy** and **Cpl JB Bolduc; Miss Julie Drumbl** and **Capt JP Loiselle; Miss Dorothy Emery** and **Sgt RL MacLennan; Miss Michelle Côté** and **Pte JG Moir; Miss Dorothy McKay** and **MCpl WH Renwick; Miss Margaret Mutch** and **Capt Dave Rowat.**

Births

and congratulations to: **Sgt and Mrs JF Butson (a daughter); Cpl and Mrs RG Duffield (a daughter); Cpl and Mrs AT Baird (a son); Cpl and Mrs JG Girard (a daughter); Cpl and Mrs RA Bosnell (a son); Sgt and Mrs AD Hurley (a daughter);** and **Sgt and Mrs DT Langford (a son).**

Condolences

Deepest sympathy is extended to **Sgt WK Jenereaux** on the loss of his mother, and to **LCol H Griesbach** and **Capt R Lévesque** on the loss of their fathers.

CFDE SETS $35,000 GOAL FOR PROFESSION

OCTOBER IS CFDE MONTH and $35,000 will be sought from the dental profession during the annual campaign of the Canadian Fund for Dental Education.
Approximately 8,000 dentists will receive letters asking for their support of CFDE's programs and goals in behalf of dental education and research.

It's a lot of money and all of it is needed to advance the prestige of dentistry. (Major grants already approved by the trustees for 1974 include:

cfde

Teacher/researcher training awards	$46,750
Grants to dental schools	$10,000
Research, teaching and students' conferences	$15,400
Accreditation programs	$15,648
Dental auxiliary workshop conference	$ 6,000
Student table clinic program	$ 4,000

These plus other awards will provide a record shattering $105,000 of badly needed assistance this year.)

All gifts are tax deductible and are acknowledged in the Fund's annual report published in the CDA Journal. Dentists contributing $100.00 or more are designated as "Honour Members" of CFDE.
IF DENTISTRY MATTERS, SO DOES DENTAL EDUCATION – PLEASE GIVE GENEROUSLY!

CANADIAN FUND FOR DENTAL EDUCATION

234 ST. GEORGE STREET, TORONTO, ONT. M5R 2P2 TELEPHONE 962-3261

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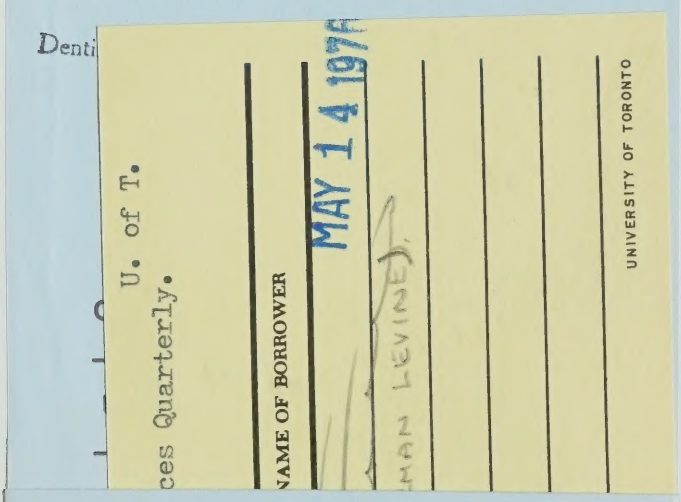
The Canadian forces dental services quarterly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